

1201 HAYN STREET
TALLAHASSEE, FL 32301-2607
904-222-0171 FAX

800-112-8086

0960000055384



PROMISE HALL
TELECOMMUNICATIONS SERVICES ACCOUNT NO. : 072100000032

REFERENCE : 991416 96077A

AUTHORIZATION : Patricia Pizzuti

COST LIMIT : \$ 122.50

ORDER DATE : June 18, 1996

ORDER TIME : 12:02 PM

ORDER NO. : 991416

CUSTOMER NO: 96077A

300001865933

CUSTOMER: Mr. Thomas H. Fullman
MR. THOMAS H. FULLMAN

3929 Northeast Skyline Drive

Jensen Beach, FL 34957

DOMESTIC FILING

NAME: FULLMAN INTERCON INC.

EFFECTIVE DATE:

☒ ARTICLES OF INCORPORATION
☐ CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

☒ CERTIFIED COPY
☐ PLAIN STAMPED COPY
☐ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Karen B. Rozar

EXAMINER'S INITIALS:

624-671
W96-12997

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JUN 19 AM 11:44
RECEIVED
95 JUN 18 PM 2:04
DIVISION OF CORPORATION

8/7/96



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

June 19, 1996

CSC NETWORKS
1201 HAYS STREET
TALLAHASSEE, FL 32301

SUBJECT: FULLMAN INTERCON INC.
Ref. Number: W96000012997

RESUBMIT

Please give original
submission date as file date.

We have received your document for FULLMAN INTERCON INC. and the authorization to debit your account in the amount of \$122.50. However, the document has not been filed and is being returned for the following:

The document must include original signatures.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6973.

Claretha Golden
Document Specialist

Letter Number: 096A00030379

RECEIVED
96 JUL -1 AM 8:15
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
96 JUN 19 AM 11:44

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

96 JUN 19 AM 11:44

ARTICLES OF INCORPORATION

OF

FULLMAN INTERCON INC.

The undersigned incorporators for the purpose of forming a corporation under the Florida Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

FULLMAN INTERCON INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

3929 NE Skyline Drive
Jensen Beach, Florida 34957

ARTICLE III CAPITAL STOCK

The number of shares that this corporation is authorized to have outstanding at any one time is:

One Hundred Shares (100)

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The Name and address of the initial registered agent is:

Thomas H. Fullman Ph.D.
3929 NE Skyline Drive
Jensen Beach, Florida 34957

ARTICLE V INCORPORATORS

The Names and street address of the incorporators to these Articles of Incorporation are:

Thomas H. Fullman Ph.D.
3929 NE Skyline Drive
Jensen Beach, Fl 34957

The purpose of this corporation will be to conduct any lawful business under the laws of the State of Florida.

There will be no personal liability for any and all actions of the corporation or it's employees for the shareholders or directors.

There will be no more than ten nor less than two members of the Board of Directors at any one time.

The undersigned have executed these Articles of Incorporation this 12th day of JUNE, 1996.

Thomas H. Sullivan Ph.D
Signature/Title

**CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of sections 007.0501 or 017.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submit the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the corporation is: FULLMAN INTERCON, INC.

2. The name and address of the registered agent and office is:

THOMAS H. FULLMAN, Ph.D.
(NAME)

3929 NE SKYLINE DRIVE
(P.O. BOX NOT ACCEPTABLE)

Jensen Beach, Florida 34457
(CITY/STATE/ZIP)

FILED STATE
SECRETARY OF CORPORATIONS
96 JUN 19 4:11:44

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

SIGNATURE

Thomas H. Fullman Ph.D.

DATE

6-27-96

REGISTERED AGENT FILING FEE: \$35.00