

# P960000 58876

## CAPITAL CONNECTION, INC.

417 E. Virginia St., Suite 1, Tallahassee, FL 32301, (904)224-8870  
 Mailing Address: Post Office Box 10349, Tallahassee, FL 32302  
 TOLL FREE No. 1-800-342-8062  
 FAX (904) 222-1222

NAME \_\_\_\_\_  
 FIRM \_\_\_\_\_  
 ADDRESS \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

PHONE ( ) \_\_\_\_\_

Service: Top Priority \_\_\_\_\_ Regular \_\_\_\_\_  
 One Day Service Two Day Service

To us via \_\_\_\_\_ Return via \_\_\_\_\_

Matter No.: \_\_\_\_\_ Express Mail No. \_\_\_\_\_

State Fee \$ \_\_\_\_\_ Our \$ \_\_\_\_\_

RE: Inter-facred Systems  
International, Inc.

C.C. FEE. DISBURSED

<input type="checkbox"/> Capital Express <sup>SM</sup>		
<input checked="" type="checkbox"/> Art. of Inc. File	95 JUL 15 2:15 PM '96	FILED
<input type="checkbox"/> Corp. Record Search		
<input type="checkbox"/> Ltd. Partnership File		
<input type="checkbox"/> Foreign Corp. File		
<input checked="" type="checkbox"/> ( ) Cert. Copy(s)		
<input type="checkbox"/> Art. of Amend. File		
<input type="checkbox"/> Dissolution/Withdrawal		
<input type="checkbox"/> C U S-		
<input type="checkbox"/> Fictitious Name File		
<input type="checkbox"/> Name Reservation		
<input type="checkbox"/> Annual Report/Reinstatement	000001-893835	
<input type="checkbox"/> Reg. Agent Service	07/15/96-DT005-D13	
<input type="checkbox"/> Document Filing	****122.50	****122.50
<input type="checkbox"/> Corporate Kil		
<input type="checkbox"/> Vehicle Search		
<input type="checkbox"/> Driving Record		
<input type="checkbox"/> Document Retrieval		
<input type="checkbox"/> UCC 1 or 3 File		
<input type="checkbox"/> UCC 11 Search		
<input type="checkbox"/> UCC 11 Retrieval		
<input type="checkbox"/> File No.'s, Copies		
<input type="checkbox"/> Courier Service		
<input type="checkbox"/> Shipping/Handling		
<input type="checkbox"/> Phone ( )		
<input type="checkbox"/> Top Priority		
<input type="checkbox"/> Express Mail Prep.		
<input type="checkbox"/> FAX ( ) pgs.		

SUBTOTALS \_\_\_\_\_

FEE.....	\$ _____
DISBURSED.....	\$ _____
SURCHARGE.....	\$ _____
TAX on corporate supplies.....	\$ _____
SUBTOTAL.....	\$ _____
PREPAID.....	\$ _____
BALANCE DUE.....	\$ _____

P. CHESSEER JUL 15 1996

REQUEST	TAKEN	CONFIRMED	APPROVED
DATE	_____	_____	_____
TIME	_____	_____	CK No. _____
BY	_____	_____	_____

WALK-IN 7/15 12:00  
 Will Pick Up \_\_\_\_\_

Please remit invoice number with payment  
 TERMS: NET 10 DAYS FROM INVOICE DATE  
 1 1/2% per month on Past Due Amounts  
 Past 30 Days, 18% per Annum.

THANK YOU  
 from  
 Your Capital Connection

INTERFACED SYSTEMS INTERNATIONAL, INC.  
6610 N. University Dr. #220  
Tamarac, FL 33321

July 11, 1996

SECRETARY OF STATE  
CORPORATION DIVISION  
THE CAPITOL  
TALLAHASSEE, FLORIDA 32301

FILED  
96 JUL 15 AM 10:05  
TALLAHASSEE, FLORIDA

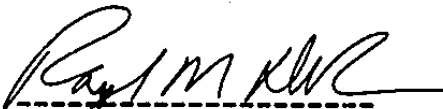
Re: Articles of Incorporation

Dear Sirs,

Enclosed you will find my check in the amount of \$122.50 which pays the filing fee, Resident agent fee, and certified copy of the Articles of Incorporation included herein.

Thank you for your consideration in this matter, and if you have any questions, please contact me immediately.

Very truly yours,

  
-----  
Raymond M. DiRocco  
Director

ARTICLES OF INCORPORATION  
OF  
INTERFACED SYSTEMS INTERNATIONAL, INC.

ARTICLE I

NAME

The name of this Corporation shall be :  
  
INTERFACED SYSTEMS INTERNATIONAL, INC.

FILED  
95 JUL 15 AM 10:05  
TALLAHASSEE, FLORIDA

ARTICLE II

PURPOSE

This corporation is organized for the purpose of operating  
as a CONSULTATION COMPANY and transacting any  
and all lawful business.

ARTICLE III

CAPITAL STOCK

This corporation is authorized to issue 1000 shares of \$1  
par value common stock.

ARTICLE IV

INITIAL PRINCIPAL OFFICE AND REGISTERED AGENT

The street address of the initial principal office and  
registered office of this corporation is 6610 N. University  
Dr. #220, Tamarac, FL 33321 and the name of the  
initial registered agent of this corporation at the above  
address is:

Raymond M. DiRocco

#### ARTICLE V

##### DIRECTORS

This corporation shall have one Director initially. The number of Directors may be either increased or diminished from time to time by the By-Laws but shall never be less than one. The name and address of the initial Director of this corporation is:

Raymond M. DiRocco  
6610 N. University Dr. #220  
Tamarac, FL 33321

#### ARTICLE VI

##### INCORPORATORS

The name and address of the person signing these Articles is:

Raymond M. DiRocco  
6610 N. University Dr. #220  
Tamarac, FL 33321

#### ARTICLE VII

##### POWERS

This corporation shall have all of the corporate powers enumerated in the Florida General Corporation Act.

#### ARTICLE VIII

##### INDEMNIFICATION

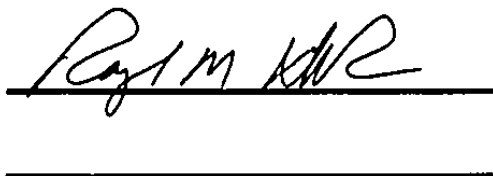
The corporation shall indemnify any officer or director or former officer or former director to the full extent permitted by law.

ARTICLE IX

AMENDMENT

This corporation reserves the right to amend or repeal any provisions contained in these Articles of Incorporation, or any Amendment to them, and any right conferred upon the shareholders is subject to this reservation.

IN WITNESS WHEREOF, the undersigned subscriber has executed these Articles of Incorporation on this 11TH day of JULY, 1996.

  
\_\_\_\_\_

STATE OF FLORIDA  
COUNTY OF BROWARD

I HEREBY CERTIFY that on this 11TH Day of JULY, 1996, personally appeared before me, the undersigned authority, Raymond M. DiRocco, to me well known and known to me to the individual described in and who executed the foregoing Articles of Incorporation, and acknowledged before me that they executed the same freely and voluntarily for the purpose therein expressed.

  
\_\_\_\_\_  
Notary Public

My commission Expires:



JOYCE M. BARBERA  
COMMISSION # CC 366659  
EXPIRES APR 24, 1998  
BONDED THRU  
ATLANTIC BONDING CO., INC.

CERTIFICATE DESIGNATION PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN FLORIDA. NAMING AGENT UPON WHICH PROCESS MAY BE SERVED.

IN COMPLIANCE WITH SECTION 48.091, FLORIDA STATUTES. THE FOLLOWING IS SUBMITTED;

INTERFACED SYSTEMS INTERNATIONAL, INC.

DESIRING TO ORGANIZE OR QUALIFY UNDER THE LAWS OF THE STATE OF FLORIDA.

WITH ITS PRINCIPAL PLACE OF BUSINESS AT 6610 N. University Dr. #220 CITY OF TAMARAC, COUNTY OF BROWARD, STATE OF FLORIDA. AS IT'S AGENT TO ACCEPT SERVICE OF PROCESS WITHIN FLORIDA.

SIGNATURE

Ray M KVR  
(CORPORATE OFFICER)

TITLE

DATE

7/11/96

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AM FAMILIAR WITH AND ACCEPT THE DUTIES AND RESPONSIBILITIES AS REGISTERED AGENT OF SAID CORPORATION, AND I HEREBY COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES.

SIGNATURE

DATE

Ray M KVR  
7/11/96

FILED  
95 JUL 15 AM 10:05  
ALLIANCE, FLORIDA