1960000000053

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT: AUTOI	MATED INT	FERACTIVE SOLUTIONS, INC.
(1	Proposed corporate	name - must include suffix)
		900001924978 -08/16/9601053020 ****122.50 ****122.50
Enclosed is an origina	I and one (1) co	ppy of the articles of incorporation and a check
for : \$70.00 Filling Fee	\$78.75 Filing Fee & Certificate	\$122.50 \$131.25 Filing Fee Filing Fee, & Certified Copy & Certificate Additional Copy Required
FROM:		B. GRIMLAND (printed or typed)
		Address SEE SEE SEE SEE SEE SEE SEE SEE SEE S
		noD FL 32750
	407-3	328-0058
	-	Telephone number 10 1996' BSB

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt the following Articles of Incorporation.

ARTICLE I

NAME

The name of the corporation shall be:

Automated Interactive Solutions, Inc.

ARTICLE II

PRINCIPAL OFFICE

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

Principal Office:

1017 High Point Loop

Longwood, FL 32750

Corporate Address:

P.O. Box 196771

Winter Springs, FL 32719-6771

ARTICLE III SHARES

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

One Hundred (100) no-par

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

David B. Grimland 1017 High Point Loop Longwood, FL 32750

ARTICLE V INCORPORATOR

The name and street address of the incorporator to the Articles of Incorporation is:

David B. Grimland 1017 High Point Loop Longwood, FL 32750

ARTICLE VI

EFFECTIVE DATE

The effective date of incorporation is:

5 August 1996 Or earliest file date available.

The undersigned in5 and day of	ncorporator has has e August	executed these Articles of Incorporation thi
_	Daiel	B. Gufand Signature

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

- 1. The name of the corporation is: Automated Interactive Solutions, Inc.
- 2. The name and address of the registered agent and office is:

David B. Grimland 1017 High Point Loop Longwood, FL 32750



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)

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DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314