P96000014120 TRANSMITTAL LETTER

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

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6 1996

	sed is an original and one (1) copy of the articles of incorporation a					
for :	\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	\$122.50 Filing Fee & Certified Copy Additional Copy F	\$131.25 Filing Fee, Certified Copy & Certificate Required		
	FROM:	GLENDA GAIL LOWERY Name (printed or typed)				
		<u>P.o. Bo</u>	X 13/4 CHTS Address	STER R	25 SEP -	والاستار و الأ الاستارات الاستارات
		HOSFOR Cir	y, State & Zip	2334	SSEE FL	
		()()/) Daytime	3 <u>79 - 8205</u> Telephone number		ORIDA ORIDA	

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

ARTICLES OF INCORPORATION

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

ARTICLE I

The name of the corporation shall	G G.15	Compute	r Survic	ies , Lnc.
The principal place of business an	d mailing address	INCIPAL OFFICE of this corporation SICY RC		96 SEP -6 PH 1:49

NAME

ARTICLE III SHARES

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

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and address of the initial registered agent is:

Chester Rd)

INCORPORATOR(S)

See instructions for officers/directors

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

10th day of Soptimber, 19 996.

(An additional article must be added if an effective date is requested.)

Signature

Signature

Notarization is not required

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

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:	(7,6,5	Computer	Services	INC.
2.	The name and address of the regis	stered agent and of	Tice is:		_
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	Hospord	1	32234		41:19

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) (DATE)