

-P 960000 76222

Date 09/09/96

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

FILED
SEP 12 11 53 AM '96
TALLAHASSEE, FLORIDA

Re: CONSUMER SATISFACTION INDEX, CORP, Inc.
(name of corporation)


Gentlemen:

Enclosed please find the original and one copy of Articles of Incorporation, together with my check in the amount of \$122.50.

This represents the cost of the Filing Fees, Certified Copy of Articles of Incorporation and Fee for Registered Agent Designation for the above named corporation.

Very truly yours,

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-09/12/96--01042--018
****122.50 ****122.50



THOMAS H. BELL
(individual's name)

CONSUMER SATISFACTION INDEX, CORP.
(name of corporation)

MAILING ADDRESS OF CORPORATION		
CONSUMER SATISFACTION INDEX, CORP.		
445 DOUGLAS AVE SUITE 2105-D		
ALTAMONTE SPRINGS, FL 32714		
PHONE		
(407)	862-2225	
Area Code	Number	Ext.

7. CHECKS SEP 13 1996

ARTICLES OF INCORPORATION

of

CONSUMER SATISFACTION INDEX, CORP.

(name of corporation)

The undersigned subscriber(s) to these Articles of Incorporation, natural person(s) competent to contract, hereby form a corporation under the laws of the State of Florida.

ARTICLE I - CORPORATE NAME

The name of the corporation is:

CONSUMER SATISFACTION INDEX, CORP.

ARTICLE II - DURATION

This corporation shall exist perpetually unless dissolved according to Florida law.

ARTICLE III - PURPOSE

The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.

ARTICLE IV - CAPITAL STOCK

The corporation is authorized to issue THREE HUNDRED shares (300) of ONE Dollar(s) (\$ 1.00) per value Common Stock, which shall be designated "Common Shares."

ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT

The principal office, if known, or the mailing address of the corporation is:

NAME: CONSUMER SATISFACTION INDEX, CORP.		
ADDRESS: 445 DOUGLAS AVE, SUITE 2105-D		
CITY: ALTAMONTE SPRINGS,	FLORIDA	ZIP: 32714

The name and street address of the Initial Registered Agent of this Corporation is:

NAME: THOMAS H. BELL		
ADDRESS: 445 DOUGLAS AVE. SUITE 2105-D		
CITY: ALTAMONTE SPRINGS	FLORIDA	ZIP: 32714

ARTICLE VI - INITIAL BOARD OF DIRECTORS

This corporation shall have TWO (2) directors 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 (1). The names and addresses of the initial director(s) of the corporation are as follows:

NAME: THOMAS H. BELL		
ADDRESS: 445 DOUGLAS AVE SUITE 2105-D		
CITY: ALTAMONTE SPRINGS	STATE: FL	ZIP: 32714
NAME: CARL A. SCONEELY		
ADDRESS: 7 WEST MAIN ST.		
CITY: APOPKA	STATE: FL	ZIP: 32703
NAME:		
ADDRESS:		
CITY:	STATE:	ZIP:

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ARTICLE VII - INCORPORATORS

The names and addresses of the incorporators signing these Articles of Incorporation are as follows:

NAME <u>THOMAS H. BELL</u>		
ADDRESS <u>445 DOUGLAS AVE SUITE 2105-D</u>		
CITY <u>ALTAMONTE SPRINGS</u>	STATE <u>FL</u>	ZIP <u>32714</u>
NAME _____		
ADDRESS _____		
CITY _____	STATE _____	ZIP _____
NAME _____		
ADDRESS _____		
CITY _____	STATE _____	ZIP _____

IN WITNESS WHEREOF, the undersigned subscriber(s) have executed these Articles of Incorporation this _____ day of SEPTEMBER 06, 1996.

(Seal)

(Seal)

(Seal)

STATE OF FLORIDA)
)
) SS
COUNTY OF SEMINOLE)

before me, a Notary Public authorized to take acknowledgements in the State and County set forth above, personally appeared

THOMAS H. BELL

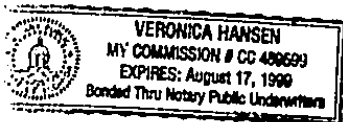
known to me and known to be the person(s) who executed the foregoing Articles of Incorporation, and who acknowledged before me that HE executed these Articles of Incorporation.

IN WITNESS WHEREOF, I have hereunto affixed my hand and seal, in the State and County aforesaid, this 09 day of SEPTEMBER, 1996.

(Notary Seal)

Veronica Hansen
(Notary Public, State of Florida at Large)

My Commission expires: Aug. 17, 1999



CERTIFICATE AND ACKNOWLEDGEMENT
OF REGISTERED AGENT

CERTIFICATE OF REGISTERED AGENT
OF

CONSUMER SATISFACTION INDEX, CORP.

(name of corporation)

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted:

The above corporation, desiring to organize under the laws of the State of Florida with
its registered office as indicated in the Articles of Incorporation

at 445 DOUGLAS AVE SUITE 2105-D

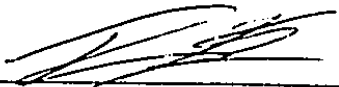
ALTAMONTE SPRINGS, FL 32714

has named THOMAS H. BELL

located at the aforesaid address, as its Registered Agent to accept service of process
within this state.

ACKNOWLEDGEMENT

Having been named as Registered Agent to accept service of process for the above
stated corporation at the place designated in this certificate, and being familiar with
the obligations of that position, I hereby accept to act in this capacity, and agree to
comply with the provisions of Florida Law in keeping open said office.



(registered agent)

FILED
CLERK OF CIRCUIT COURT
MIAMI, FLORIDA

96 SEP 12 AM 9:26