

P96000080372

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CT CORPORATION SYSTEM

Requestor's Name

660 East Jefferson Street

Address

Tallahassee, FL 32301 222-1092

City

State

Zip

Phone

100001958901
-09/27/96--01035--017
*****70.00 *****70.00

CORPORATION(S) NAME

Information Solutions, Inc.

☒ Profit *acts of Inc.*

☐ NonProfit

☐ Limited Liability Co.

☐ Foreign

☐ Limited Partnership

☐ Reinstatement

☐ Certified Copy

☐ Call When Ready

☒ Walk In

☐ Mail Out

☐ Amendment

☐ Dissolution/Withdrawal

☐ Annual Report

☐ Reservation

☐ Photo Copies

☐ Call if Problem

☐ Merger

☐ Mark

☐ Other

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☐ Fic. Name

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☐ After 4:00

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SEP 27 1996

CR2E031 (1-89)

STATE OF FLORIDA
ARTICLES OF INCORPORATION
OF
INFORMATION SOLUTIONS, INC.

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TALLAHASSEE, FLORIDA

FIRST: THE CORPORATE NAME THAT SATISFIES THE REQUIREMENTS OF SECTION 607.0401 IS: Information Solutions, Inc.

SECOND: THE ADDRESS OF THE PRINCIPAL OFFICE, AND THE MAILING ADDRESS OF THE CORPORATION IS: 2619 Emerald Way North, Deerfield Beach, Florida 33442

THIRD: THE NUMBER OF SHARES THE CORPORATION IS AUTHORIZED TO ISSUE IS: 10,000

FOURTH: (a) IF THE SHARES ARE TO BE DIVIDED INTO CLASSES, THE DESIGNATION OF EACH CLASS IS: Common

(b) STATEMENT OF THE PREFERENCES, LIMITATIONS AND RELATIVE RIGHTS IN RESPECT OF THE SHARES OF EACH CLASS:

| <u>CLASS</u> | <u>PREFERENCES</u> | <u>LIMITATIONS</u> | <u>RELATIVE RIGHTS</u> |
|--------------|--------------------|--------------------|------------------------|
| N/A | N/A | N/A | N/A |

FIFTH: (a) IF THE CORPORATION IS TO ISSUE THE SHARES OF ANY PREFERRED OR SPECIAL CLASS IN SERIES, THE DESIGNATION OF EACH SERIES IS: N/A

(b) STATEMENT OF THE VARIATIONS IN THE RELATIVE RIGHTS AND PREFERENCES AS BETWEEN SERIES INsofar AS THE SAME ARE TO BE FIXED IN THE ARTICLES OF INCORPORATION:

| <u>SERIES</u> | <u>RELATIVE RIGHTS</u> | <u>PREFERENCES</u> |
|---------------|------------------------|--------------------|
| N/A | N/A | N/A |

(c) STATEMENT OF ANY AUTHORITY TO BE VESTED IN THE BOARD OF DIRECTORS TO ESTABLISH SERIES AND FIX AND DETERMINE THE VARIATIONS IN THE RELATIVE RIGHTS AND PREFERENCES BETWEEN SERIES: N/A

SIXTH: PROVISIONS GRANTING PREEMPTIVE RIGHTS ARE: N/A

SEVENTH: PROVISIONS FOR THE REGULATION OF THE INTERNAL AFFAIRS OF THE CORPORATION ARE: N/A

EIGHTH: THE STREET ADDRESS OF THE INITIAL REGISTERED OFFICE OF THE CORPORATION IS C/O C T CORPORATION SYSTEM, 1200 SOUTH PINE ISLAND ROAD, CITY OF PLANTATION, FLORIDA 33324, AND THE NAME OF ITS INITIAL REGISTERED AGENT AT SUCH ADDRESS IS C T CORPORATION SYSTEM.

*NINTH: THE NUMBER OF DIRECTORS CONSTITUTING THE INITIAL BOARD OF DIRECTORS OF THE CORPORATION IS ONE (1) AND THE NAMES AND ADDRESSES OF THE PERSONS WHO ARE TO SERVE AS DIRECTORS UNTIL THE FIRST ANNUAL MEETING OF SHAREHOLDERS OR UNTIL THEIR SUCCESSORS ARE ELECTED AND SHALL QUALIFY ARE:

| | |
|------------------|--|
| Albert L. Lehman | 1860 Page Place Malvern, Pennsylvania 19355 |
|------------------|--|

TENTH: THE NAME AND ADDRESS OF EACH INCORPORATOR IS:

| | |
|-----------------|--|
| Heather L. Reid | 1635 Market Street Philadelphia, Pennsylvania 19103 |
|-----------------|--|

| | |
|-------------------|--|
| Maria T. Chambers | 1635 Market Street Philadelphia, Pennsylvania 19103 |
|-------------------|--|

THE UNDERSIGNED HAS (HAVE) EXECUTED THESE ARTICLES OF INCORPORATION THIS 26TH DAY OF SEPTEMBER 1996


Heather L. Reid

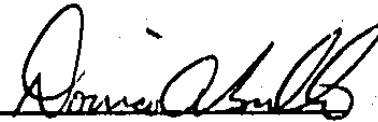

Maria T. Chambers

ACCEPTANCE BY THE REGISTERED AGENT AS REQUIRED IN SECTION
607.0501 (3) F.S.: C T CORPORATION SYSTEM IS FAMILIAR WITH AND
ACCEPTS THE OBLIGATIONS PROVIDED FOR IN SECTION 607.0505.

C T CORPORATION

DATED September 26, 1996

BY



Domenic A. Borriello, Asst. Secy.

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TALLAHASSEE, FLORIDA

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CT CORPORATION SYSTEM

660 EAST JEFFERSON STREET

Requestor's Name
TALLAHASSEE, FL 32301

Address
222-1092

City State Zip Phone

CORPORATION(S) NAME

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-12/23/96--01015--013
*****35.00 *****35.00

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12/23/96

12/23

Jon
RA change

Florida Department of State, Jim Smith, Secretary of State

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of Florida submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1a. The name of the corporation is: Information Solutions, Inc.

1b. Date of incorporation 9/27/96 Document number P96000080372

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

CT Corporation System, 1200 S. Pine Island Road, City of Plantation,
Florida 33324

3. The name and address of the new registered agent and office:

(P.O. Box Not Acceptable)

Albert L. Lehman, 2619 Emerald Way North, Deerfield Beach, FL

The street address of its registered agent and the street address of the business office of its registered agent as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.

Albert L. Lehman
11/16/96
SIGNATURE
DATE

Albert L. Lehman, President
Typed or printed name and title

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 RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATION OF MY POSITION AS REGISTERED AGENT.

SIGNATURE BY: Albert L. Lehman
(Registered Agent)
DATE 11/16/96

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