# 

SUBJECT: Efficacia Incorporated
(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check								
for:  \$70.00 Filing Fee	⊠ \$78.75 Filing Fee & Certificate	\$122.50 Filing Fee & Certified Copy  Additional Copy	\$131.25 Filling Fee, Certified Copy & Certificate Required	SECRET SECRET	1. The same			
FROM: Tim Aidlin Name (printed or typed)  545 1/2 East Call Street Apt. 10 Em. 8								
545 1/2 East Call Street Apt 104 8 8								
Tallahassee, FL 32301 City, State & Zip								
(904) 422-25-28  Daytime Telephone number								
10/24								
NOTE: Please provide the original and one copy of the articles.								

### **Articles of Incorporation**

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

SECRETARY OF STATE

#### Article I Name

The name of the corporation shall be Efficacia Incorporated.

#### Article II Principal Office

The principal place of business and mailing address of this corporation shall be:
1325 East Tennessee Street
Trader's Building
Tallahassee, Florida 32301

#### Article III Shares

The number of shares of stock that this corporation is authorized to have outstanding at any one time is 600,000.

## Article IV Initial Registered Agent and Street Address

The name and address of the initial registered agent is: Tim Aidlin 545 ½ East Call Street Apt. 104 Tallahassee, FL 32301

#### Article V Incorporators

The names and street addresses of the incorporators to these Articles of Incorporation are:
Tim Aidlin
545 ½ East Call Street Apt. 104
Tallahassee, FL 32301

Shawn Laasch 3692 Donovan Drive Apt. C Tallahassee, FL 32308

M. Christopher Wenneman 216-B4 Dixie Drive Tallahassee, FL 32304

The undersigned incorporators have executed these Articles of Incorporation this eighteenth day of October, 1996.

Skawn hash
Signature
Signature

M Christopher Wennen

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLOPIDA 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:	Efficacia Incorporated	
2.	The name and address of the regis	stered agent and office is:	<del></del>
		m Aidlin (NAME)	96 OCT 2 SECRETAR
	<u>54,</u> (P.O. Bo	5 1/2 East Call Street Apt, 104 or Mail Drop Box NOT ACCEPTABLE)	
	Talla	hassee FL 32301 (CITY/STATE/ZIP)	AHII: 06

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) 10 /8/96 (DATE)