

P96000088768

TRANSMITTAL LETTER

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

300001986923--6
-10/28/96--01033--017
****122.50 ****122.50

SUBJECT: COPIERS PLUS INC.
(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

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: COPIERS PLUS INC.
Name (Printed or typed)

811 FAIRMAIDEN LN.
Address

BRANDON, FLORIDA - 33511
City, State & Zip

(813) 618 3626
Daytime Telephone number

OCT 28 1996 B5B
OCT 29 1996

FILED

OCT 25
AM 10:58
DEPT. OF STATE
TALLAHASSEE, FLORIDA

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

ARTICLES OF INCORPORATION

FILED

96 OCT 25 AM 10:58

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 NAME

The name of the corporation shall be:

COPIERS PLUS INC.

ARTICLE II PRINCIPAL OFFICE

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

811 FAIRMAIDEN LN.

BRANDON

FL-33511

ARTICLE III SHARES

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



2 (Two)

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:



SAL MATHEW

811 FAIR MAIDEN LN.

BRANDON - FL-33511

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

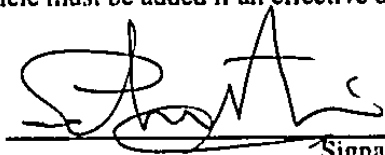
The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

SAL MATHEW
8622 LAKE ISLE DR
TAMPA, FL - 33637

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

15 day of OCTOBER, 19 96.

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



Signature

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: COPIERS PLUS INC.

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


SAL MATHEW
(NAME)

811 FAIR MAIDEN LN.
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

BRANDON, FL-33621
(CITY/STATE/ZIP)

FILED
96 OCT 25 AM 10:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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)

10/15/96
(DATE)