

P96000092209

Myers Forehand & Fuller
Requestor's Name

402 34th Ave NW Dr
Address

Tallahassee, FL 32301 878-6404
City/State/Zip Phone #

1000012001351--1
-11/08/96--01107--024
*****70.00 *****70.00
Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. Capital City Mailing, Inc
(Corporation Name) (Document #)

2. (Corporation Name) (Document #)

3. (Corporation Name) (Document #)

4. (Corporation Name) (Document #)

☐ Walk in

☐ Pick up time _____

☐ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

| NEW FILINGS | |
|--------------------------|-------------------|
| <input type="checkbox"/> | Profit |
| <input type="checkbox"/> | NonProfit |
| <input type="checkbox"/> | Limited Liability |
| <input type="checkbox"/> | Domestication |
| <input type="checkbox"/> | Other |

| AMENDMENTS | |
|--------------------------|--|
| <input type="checkbox"/> | Amendment |
| <input type="checkbox"/> | Resignation of R.A., Officer/ Director |
| <input type="checkbox"/> | Change of Registered Agent |
| <input type="checkbox"/> | Dissolution/Withdrawal |
| <input type="checkbox"/> | Merger |

| OTHER FILINGS | |
|--------------------------|------------------|
| <input type="checkbox"/> | Annual Report |
| <input type="checkbox"/> | Fictitious Name |
| <input type="checkbox"/> | Name Reservation |

| REGISTRATION/ QUALIFICATION | |
|-----------------------------|---------------------|
| <input type="checkbox"/> | Foreign |
| <input type="checkbox"/> | Limited Partnership |
| <input type="checkbox"/> | Reinstatement |
| <input type="checkbox"/> | Trademark |
| <input type="checkbox"/> | Other |

**ARTICLES of INCORPORATION
OF
CAPITAL CITY MAILING, INC.**

The undersigned incorporator, for purposes of forming a corporation under the Florida Business Corporation Act, Chapter 607, Florida Statutes, hereby adopts the following Articles of Incorporation:

Article I

NAME AND ADDRESS

The name of the Corporation is: **Capital City Mailing, Inc.** The initial principal office address of the Corporation is: 4013 Woodville Highway, suite B, Tallahassee, Florida 32301

Article II

DURATION

The duration of the Corporation is perpetual.

Article III

PURPOSE

The general purpose for which the Corporation is organized is to engage in and transact any lawful business for which corporations may be incorporated under the Florida Business Corporation Act. No other purpose limits this general purpose in any way.

Article IV

INITIAL BOARD OF DIRECTORS

The management of the Corporation shall be vested in a Board of Directors. The number of Directors constituting the initial Board of Directors is two (2). The number of Directors may be increased or decreased from time to time in accordance with the Bylaws but shall never be less than one (1). The name and address of each initial Director of the Corporation is as follows:

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96 JUN -8 PM 4:42
TALLAHASSEE, FLORIDA

Debra Hansli

1314 Mountbatten Rd.
Tallahassee, Florida 32301

Leonard McCallister

2304 Alder Rd.
Tallahassee, Florida 32303

Article V

INCORPORATOR

The Name and Address of the incorporator signing these articles is:

Debra Hansli
1314 Mountbatten Rd.
Tallahassee, Florida 32301.

Article VI

INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial Registered Office of the Corporation is:

c/o Myers, Forehand and Fuller
402 Office Plaza Drive
Tallahassee, Florida 32301

and the name of the initial registered agent at such address is:

Robert A. Bass

ARTICLE VII

CAPITAL SHARES

The aggregate number of shares which the Corporation shall have authority to issue is one hundred (100) shares of the par value of one Dollar (\$1.00) each.

IN WITNESS WHEREOF, the undersigned has signed these Articles of Incorporation on this 8th day of November, 1996.

Debra Hansli
Incorporator

Debra Hansli
Typed Name of Incorporator

STATE OF FLORIDA
COUNTY OF LEON

BEFORE ME personally appeared Debra Hansli, to me well known and known to me to be the person described in and who executed the foregoing instrument, and who after being first duly sworn, acknowledged to and before me that she executed said instrument for the purposes therein expressed.

WITNESS my hand and official seal this 8th day of November, 1996, in the aforesaid County and State.

Marie Jo Strickland

NOTARY PUBLIC



Marie Jo Strickland
MY COMMISSION # CG659925 EXPIRES
June 22, 2000
BONDED TRIPLE TROY FAIR INSURANCE, INC.

My commission expires:

ACCEPTANCE BY DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

I, the undersigned person, having been named as registered agent and to accept service of process for the above-stated corporation at the place designated in this statement, 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 a registered agent.

Robert A. Bass

Robert A. Bass

Date: November 8, 1996

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NOTARY PUBLIC
STATE OF FLORIDA