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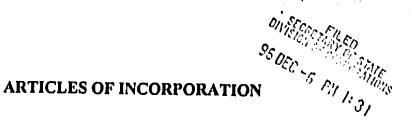
DIVISION OF PHILED PHILED PROPERTY OF STATE OF OF S

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

200002022562--5 -12/06/96--01060--020 ****122.50 ****122.50

			****122,50 ****
SUBJECT:	Payroll Systems Inc., (Proposed corpor	rate name - must include su	Mx)
Enclosed is an origi	nal and one(1) copy of the article	s of incorporation and a	check for :
☐ \$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate	S122.50 Filing Fee & Certified Copy	S131.25 Filing Fee, Certified Copy & Certificate
		ADDITIONAL CO	PY REQUIRED
FROM:	Cecil Terhune Name (Printed		©
	Name (Printed	or typea)	96 pg
	3705 Longford Drive		
	Address	5	<u> </u>
	Tallahassee, FL 32308	•	RECEIVEL
	City, State &	k Zip	1: 22
	904-893-3181		5.2
	Daytime Telephor	ne number	
			•

المركزين



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:

Payroll Systems Inc..

ARTICLE II PRINCIPAL OFFICE

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

3705 Longford Drive Tallahassee, FL 32308

ARTICLE III SHARES

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

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and address of the initial registered agent is:

Claire A. Duchemin PA 3845-1Killearn Center Ct. Tallahassee, FL 32308

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):

Cecil Terhune 3705 Longford Drive Tallahassee, FL 32308

Joan II. Terhune 3705 Longford Drive Tallahassee, FL 32708

The undersigned in	ncorporator(s) has(ha	ive) executed these	e Articles of Incorporation thi
4thday of _	December	, 19 96	•
(An additional artic	ele must be added if a	un effective date is	requested.)
_	700 -t	Aland	۾ _
-	Cell.	Signature	
	·	Signature	

Notarization is not required

Signature

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:	Payroll Systems, Inc.
	(2)
2. The name and address of the regist	ered agent and office is:
	Claire A. Duchemin
	(NAME)
	3845-1 Killearn Court
(P.O. Box	or Mail Drop Box NOT ACCEPTABLE)
	Tallahassee, FL 32308
	(
corporation at the place designated in agent and agree to act in this capacity	gent and to accept service of process for the above stated this certificate, I hereby accept the appointment as registered I further agree to comply with the provisions of all statutes formance of my duties, and I am familiar with and accept the
bligations of my position as registered	i agent.

(DATE)

llie a. sle