P9700005907 TRANSMITTAL LETTER

FLORIDA ACADEMIC

(Proposed corporate name - must include suffix)

SECRETARY OF STATE DIVISION OF CORPORATIONS 97 JAN 22 AM 9: 15

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

SUBJECT: _

INCO

PRESS

Enclosed is an original and one (1) copy of the articles of incorporation and a check for: \$70.00 **X** \$78.75 \$122.50 |\$131.25 Filing Fee Filing Fee Filing Fee Filing Fee, & Certificate & Certified Copy **Certified Copy** & Certificate **Additional Copy Required** SAMUEL DECALO FROM: Name (printed or typed) 11409 NW 8TH Address GAINESVILLE City, State & Zip 352-373-8184 Daytime Telephone number 352-331-0670

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

D. SHOWN JAN 2 2 1997

ARTICLES OF INCORPORATION



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.

> ARTICLEI NAME

The name of the corporation shall be:

FLORIDA ACADEMIC PRESS INC.

ARTICLE II PRINCIPAL OFFICE

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

Mailing Address: POBOX 540, Gainesville, Fl. 32602-0540 Business Address: 11409 NW 8th Place, Gainesville, Fl. 32606

ARTICLE III **SHARES**

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

Four

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

> SAMUEL DECALD 11409 NW 8TH PLACE GAINESVILLE, FL 32606

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):

SAMUEL DECALO, 11409 NW 8TH PLACE, GAINESVILLE, FL 32606

The undersigned inco	orporator(s) has(haye) executed these Articles of Incorporation this
_ <u>12~</u> day of	January/, , 19 97.
	Herot
	Signature
	Signature
	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

DIVISION OF CORPORATIONS
E AM 9: 15

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:	FLORIDA ACADEMIC PRESS INC
2. The name and address of the regis	tered agent and office is:
SAMUE	L DECALO (NAME)
	NW 8TH PLACE ox of Mail Drop Box NOT ACCEPTABLE)
GAIN	ESVILLE, FL 32606 (CITY/STATE/ZIP)

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 appacity. 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) (DATE) (DATE)