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DEVISION OF CONFERNATION

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

900002095349--4 -02/24/97--01045--001 ****131.25 ****131.25

SUBJECT: (Proposed corporate name - must include suffix)

Enclosion for :	sed is an origina	l and one (1) co	py of the articles o	f incorporation a	ind a check
	\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	\$122.50 Filing Fee & Certified Copy Additional Copy	\$131.25 Filing Fee, Certified Copy & Certificate y Required	
	FROM:	lerr; Name	(printed or typed)	NSON	
	597 Queens Harbour Blvd.				
			on wille, FL y, State & Zip	32225	
			20 · 6377		

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

D. BROWN FEB 2 4 1997





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:

Inform-W, Corp.

ARTICLE II PRINCIPAL OFFICE

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

597 Queens Harbour Blvd. Jacksonville, FL 32225

ARTICLE III SHARES

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

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Terri K. Atkinson

597 Queens Harbour Blod.

Jacksonville, FL 32225

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):

Terr, K. Atkinson - President 597 Queens Harbour, Blud. Jacksonville, FL 32225

The undersigned incorporator(s) has(have) executed these Articles of Incorporator	poration this
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23 day of <u>Feb.</u>, 19 97

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

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

UNDERSIGNED CORPORATION,	ORGANIZED UNDER THE LAWS OF THE STATE OF VING STATEMENT IN DESIGNATING THE REGISTERED IT THE STATE OF FLORIDA.					
1. The name of the corporation is:	Inform-W. Corp.					
2. The name and address of the registered agent and office is:						
Terri	K. Atkinson (NAME)					
597 Q (P.O. B	MEENS Hay bour Blyd. OX OF Mail Drop Box NOT ACCEPTABLE)					
	.,					

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.

Jesu K. atlingon-President Feb. 23, 1997 (SIGNATURE) (DATE)