TRANSMITTAL LETTER | Dariment of State | Double | Double

SUBJECT:	Copy QUALITY COMPANY, INC.
	(Proposed corporate name - must include suffix)

Enclosed is an original and one(1)	copy of the articles of incor	poration and a check for
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- \$70.00
- □ \$78.75
- Filing Fee Filing Fee
 - & Certificate
- \$122.50
- Filing Fee
- & Certified Copy
- \$131.25
 - Filing Fee,
 - Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

FROM: Copy Quality Company, INC. Name (Printed or typed)		
440 Bay Front PARKWAY	97 MAR SECRETALL AHA	
PENSACOLA, FL 32501	TARY OF S	· Aug
City, State & Zip 904 - 434 - 1796	9: 12 6R/02	***************************************

 $\sqrt{3/81}$

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

Daytime Telephone number

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.

ARTICLE I NAME

The name of the corporation shall be: Copy Quality Company, INC.

ARTICLE II PRINCIPAL OFFICE

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

440 BAYFRONT PARKWAY

Pensacold, FL 32501

97 MAR 17 AM 9: 12

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:

LYNN WALKER Reece 440 BAYFRONT PARKWAY PENSACOLA, FL 32501

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):

- 1. LYNN WALKER REECE
 1263 MAHOGANY Mill Rd
 PENSACOLA, FL 32507
- 2. BRIAN Reece 1263 MAHOGANY M.'11 Rd PENSACOLA, FL 32507

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

9 day of March 1997

(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 COPY QUALITY COMPA	צימ	I)	NC.
2.	The name and address of the registered agent and office is:	_		
	LYNN WALKER REECE (NAME) H40 BAY FRONT PARKWAY (P. O. BOX OF Mail Drop Box NOT ACCEPTABLE)	Γ <u>Α</u> ς,	بع	
	(P. O. Box or Mail Drop Box NOT ACCEPTABLE)	EUNE TAR	7 MAR 7	7
	PENSACOLA, FL 32501 (CITY/STATE/ZIP)	ALS POLY	AH Q	Garages Carrier Carrier Carrier
		5 <u>H</u> F	<u>.</u>	

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) 03-09-97 (Date)