

P97000046169

CAPITOL SERVICES d/b/a
PARALEGAL & ATTORNEY SERVICE BUREAU, INC.

(Requestor's Name)
1406 Hays Street, Suite 2
(Address)
Tallahassee, FL 32301 (904) 656-3992
(City, State, Zip) (Phone #)

200002189712--7

-05/23/97--01044--018

****122.50 ****122.50

OFFICE USE ONLY

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

1. World Vision Distribution, Inc.
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

☒ Walk in

☒ Pick up time 5/23

☒ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS	
<input checked="" 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

FILED
97 MAY 23 PM 1:19
STATE
TALLAHASSEE, FLORIDA

97 MAY 23 PM 1:19
STATE
TALLAHASSEE, FLORIDA

W97-12191

Done
5/23/97

Examiner's Initials



REC-111-00

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

May 23, 1997

CAPITOL SERVICES
1406 HAYS STREET STE 2
TALLAHASSEE, FL 32301

SUBJECT: WORLD VISION DISTRIBUTION, INC.
Ref. Number: W97000012191

Resubmit

We have received your document for WORLD VISION DISTRIBUTION, INC. and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Your document must include an original signature of the Registered Agent.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6923.

Doris McDuffie
Corporate Specialist Supervisor

Letter Number: 897A00028199

ARTICLES OF INCORPORATION
OF
WORLD VISION DISTRIBUTION, INC.

FILED

97 MAY 23 PM 1:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I

The name of the Corporation is World Vision Distribution, Inc.

ARTICLE II

The principal place of business and mailing address of this corporation shall be 407 Whooping Loop, Suite 1663, Altamonte Springs, Florida 32701.

ARTICLE III

The aggregate number of shares that the Corporation has authority to issue is 1,000,000 shares of common stock with no par value.

ARTICLE IV

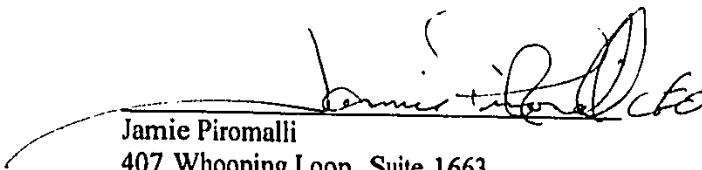
The address of the initial registered office of the Corporation is 407 Whooping Loop, Suite 1663, Altamonte Springs, Florida 32701, and the name of the Corporation's initial registered agent for service of process at such address is Jamie Piromalli.

ARTICLE V

The name of the address of the incorporator to these Articles of Incorporation is: Jamie Piromalli, 407 Whooping Loop, Suite 1663, Altamonte Springs, Florida 32701.

IN WITNESS THEREOF, I have hereunto set my hand this 21st day of

May, 1997.


Jamie Piromalli
407 Whooping Loop, Suite 1663
Altamonte Springs, FL 32701

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

FILED

97 MAY 23 PM 1:19

Pursuant to the provisions of Sections 607.0501 or 617.0501, 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.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

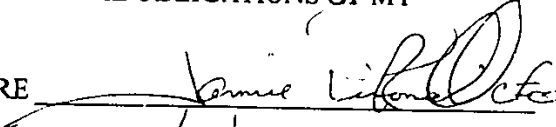
1. The name of the corporation is: World Vision Distribution, Inc.
2. The name of the registered agent and office is:

Jamie Piromalli
407 Whooping Loop, Suite 1663, Altamonte Springs, Florida 32701

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

DATE


5/21/97