

P97000048998  
TRANSMITTAL LETTER

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

500002196245--6  
-05/30/97--01075--015  
\*\*\*\*122.50 \*\*\*\*122.50

SUBJECT: Transactions, Inc. of TALLAHASSEE  
(Proposed corporate name - must include suffix)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for:

☐ \$70.00  
Filing Fee

☐ \$78.75  
Filing Fee  
& Certificate

☒ \$122.50  
Filing Fee  
& Certified Copy

☐ \$131.25  
Filing Fee,  
Certified Copy  
& Certificate

ADDITIONAL COPY REQUIRED

FROM: Dan McClellan  
Name (Printed or typed)

1981 Capital Circle N.E.  
Address

Tallahassee, FL 32308  
City, State & Zip

(904) 385-9889  
Daytime Telephone number

FILED  
97 JUN -2 PM 4:14  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Dmc  
6/3/97

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



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham  
Secretary of State

April 18, 1997

DAN MCCLELLAN  
1981 CAPITAL CIRCLE NE  
TALLAHASSEE, FL 32308

SUBJECT: TRANSACTIONS, INC.  
Ref. Number: W97000009089

We have received your document for TRANSACTIONS, INC., however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$122.50.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of an entity name **DOES NOT** constitute a difference. Please select a new name and make the substitution in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

When the document is resubmitted, please return a copy of this letter to ensure that your document is properly handled.

If you have any questions about the availability of a particular name, please call (904) 488-9000.

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: 597A00019908

## 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:

Transactions, Inc. of TALLAHASSEE

FILED  
97 JUN -2 PM 4:14  
TALLAHASSEE FLORIDA

### ARTICLE II PRINCIPAL OFFICE

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

1981 Capital Circle, N.E.  
Tallahassee, Florida 32308

### ARTICLE III SHARES

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

100

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Danny R. McClellan  
1981 Capital Circle, N.E.  
Tallahassee, Florida 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):

Danny R. McClellan - President  
1981 Capital Circle N.E.  
Tallahassee, Fl 32308

Brian C. Proctor - Vice President  
1981 Capital Circle, N.E.  
Tallahassee, Fl 32308

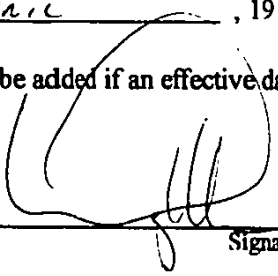
Danny R. McClellan - Secretary  
1981 Capital Circle, N.E.  
Tallahassee, Fl 32308

Brian C. Proctor - Treasurer  
1981 Capital Circle, N.E.  
Tallahassee, Fl 32308

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

9<sup>th</sup> day of April, 19 97.

(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**

**FILED**  
97 JUN -2 PM 4:14  
SEC. OF STATE  
TALLAHASSEE, FLORIDA

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 Transactions, Inc. OF TALLAHASSEE

2. The name and address of the registered agent and office is:

Danny R. McClellan

(NAME)

1981 Capital Circle, N.E.

(P. O. Box or Mail Drop Box **NOT** ACCEPTABLE)

Tallahassee, Florida 32308

(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 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)

6/9/97  
(DATE)