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TRANSMITTAL LETTER

FILED

97 JUN 20 AM 11:44

DEPT. OF STATE  
TALLAHASSEE, FLORIDA

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

SUBJECT: DIVERSICOM INCORPORATED  
(proposed corporate name)

Enclosed is an original and one (1) copy of the articles of incorporation and our check  
for \$ 122.50.

900002218849--5  
-06/20/97--01103--012  
\*\*\*\*122.50 \*\*\*\*122.50

FROM: KARIN ROHRET  
5290 SEMINOLE BLVD., SUITE F  
ST PETERSBURG, FL 33708  
( 813 ) 393 - 0872  
Telephone Number

Note: Please provide the original and one copy of the Articles.

97 6-23-97

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STATE OF FLORIDA  
TALLAHASSEE

ARTICLES OF INCORPORATION

OF

DIVERSICOM INCORPORATED

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:

DIVERSICOM INCORPORATED

ARTICLE II PRINCIPAL OFFICE

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

801 WEST BAY DRIVE, SUITE 703  
LARGO, FL 33770

ARTICLE III SHARES

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

1,000 COMMON STOCK

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

KARIN ROHRET  
5290 SEMINOLE BLVD., SUITE F  
ST PETERSBURG, FL 33708

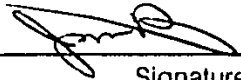
ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

JAMES A BETZ  
801 WEST BAY DRIVE, SUITE 703  
LARGO, FL 33770

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

18th. day of JUNE, 19 97.



Signature

Signature

Signature

**CERTIFICATE OF DESIGNATION  
REGISTERED AGENT/REGISTERED OFFICE**

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.

1. The name of the corporation is: \_\_\_\_\_

DIVERSICOM INCORPORATED

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

KARIN ROHRET

(NAME)

5290 SEMINOLE BLVD., SUITE F

(P.O. BOX NOT ACCEPTABLE)

ST PETERSBURG, FL 33708

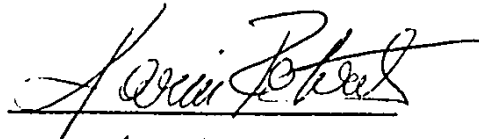
(CITY/STATE/ZIP)

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TALLAHASSEE, FLORIDA

FILED

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

6/18/1997