

TRANSMITTAL LETTER

P97000060663

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

97 JUL 11 AM 9:02

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

SUBJECT: Advanced Document Impressions Inc.
(Proposed corporate name - must include suffix)

600002235756--4
-07/11/97--01050--012
***122.50 ***122.50

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: Steven Lim
Name (Printed or typed)

5349 NW 35 AVE
Address

FL LAUDERDALE, FL 33309
City, State & Zip

954-735-7175
Daytime Telephone number

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

RP
7-14-97

97 JUL 11 AM 9:02

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

Advanced Document Impressions Inc.

ARTICLE II PRINCIPAL OFFICE

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

5349 NW 35 AVE
FT. LAUDERDALE, Florida
33309

ARTICLE III SHARES

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

100,000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

ALLTRADE BUSINESS FORMS INC.
5349 NW 35 AVE
FT. LAUDERDALE, FL 33309

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

ALLTRADE BUSINESS FORMS INC.
5349 NW 35 AVE
FT. LAUDERDALE, FL
33309



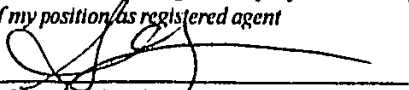
Signature/Incorporator

7/8/97

Date

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

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/Registered Agent

7/8/97

Date