TRANSMITTAL LETTER

P97000061508

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

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			****122.50) *****122。
SUBJECT:	CUSTOMER CONN (Proposed co	Proporate name - must include	e suffix)	DIVISIO
Enclosed is an origina	al and one(1) copy of the article	s of incorporation and a c	check for :	ON VISION OF CORPORATIONS ON VISION OF CORPORATION OF CORP
\$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate	\$122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate	8: 42
		ADDITIONAL CO	PY REQUIRED	_
FROM:	CUSTOMER CON Name (P)	UNECTION C	ORP.	
	4428 South	/WINDS Address		
	DESTIN F	7. 3254 State & Zip		
	850/26	7-4428		

51/16

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

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.

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ARTICLE I NAME

The name of the corporation shall be:

CUSTOMER CONNECTION CORF

ARTICLE II PRINCIPAL OFFICE

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

CUSTOMER CONNECTION COPP. 4428 SOUTHWINDS DESTIN FC. 32541

ARTICLE III SHARES

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

100 SHARES @ \$1000 per Value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

KRISTEN L. ERICKSON 722 JAILFISH DR. FORT WALTON BEACH FL 32548

ARTICLE V INCORPORATOR

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

PAT ABRUZZO 4428 SOUTHWINDS DESTIN FL 30541

Signature/Incorporator () PATRICIA J. ABRUZZO

(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

7/10/197 Date