D9700068405 TRANSMITTAL LETTER

DIVISION OF CORPORATIONS

97 AUG -6 AM 11:47

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

SUBJECT: Florida Headset & Communications Supply Corp.
(Proposed corporate name - must include suffix)

000002259440--2 -08/06/97--01065--002 ****131 25 ****131 25

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

\$131.25

Filing Fee

Filing Fee,

& Certified Copy

Certified Copy & Certificate

ADDITIONAL COPY REQUIRED

FROM: Thad A. Shimp Name (Printed or typed)

Name (Printed or typed)

748 Century 21 DRIVE

JACKSON VILLE FL 32216
City, State & Zip

(904) 745-1172
Daytime Telephone number

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



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

ARTICLE .	<u>I NAME</u>
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The name of the corporation shall be:

Florida Headset & Communications Supply Corp.

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ARTICLE	11	PRINCIPAL	OFFICE

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

7530 MERRILL RJ #8 JACKSONVIlle FL 32277

P.O. BOX 5217 JACKSONVIlle FL 32247-5217

ARTICLE III SHARES

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

7,500

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

That A. Shimp 748 Century 21 DR JACKSON VILLE FL 32216 ARTICLE V INCORPORATOR

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

Thad A. Shimp 748 Century 21 DR JACKSONVIlle FL 32216

(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