

P98000006269

TRANSMITTAL LETTER

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

100002404351--4  
-01/20/98--01033--011  
\*\*\*\*122.50 \*\*\*\*122.50

SUBJECT: Scan Solutions Inc.  
(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

FROM:

Charles Goodman  
Name (printed or typed)

901 Martin Luther Blvd Suite 306A  
Address

Palm City, FL 34990  
City, State & Zip

(561) 781-1940  
Daytime Telephone number

FILED  
98 JAN 20 PM 12:53  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

NOTE: Please provide the original and one copy of the articles. *98-1-21-98*

# 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:

*Scan Solutions, Inc.*

## ARTICLE II PRINCIPAL OFFICE

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

*901 Martin Downs Blvd, Suite 306A  
Palm City, FL 34990*

## ARTICLE III SHARES

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

*10,000*

## ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

*Charles Goodman  
901 Martin Down Blvd, Suite 306A  
Palm City, FL 34990*

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ARTICLE V INCORPORATOR(S)

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

*Charles Goodman*  
*901 Martin Downs Blvd.*  
*Suite 306A*  
*Palm City, FL 34990*

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

13 day of Jan, 19 98.



Signature

Signature

Signature

# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 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: Scan Solutions, Inc.

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

Charles Goodman  
(Name)

901 Martin Downs Blvd Suite 306A  
(P.O. Box not acceptable)

Palm City, FL 34990  
(City/State/Zip)

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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]  
(Signature)

1/14/98  
(Date)