· CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32302 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

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DIVISION OF CORPORATIONS

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Requested by: Name Date Time Walk-In Will Pick Up	Fictitious Owner Search

ARTICLES OF INCORPORATION OF ACCUSCRIPT, INC.

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 ACCUSCRIPT, INC.

ARTICLE II PRINCIPAL OFFICE

The Principal place of business and mailing address of this corporation shall be: 140 Poinsettia Drive, Kissimmee, FL 34743.

ARTICLE III CAPITAL STOCK

The number of shares of stock that this corporation may have outstanding at any one time is 1000 shares, all of one class, with a \$.50 par value.

ARTICLE IV INITIAL REGISTERED AGENT

The name and address of the initial registered agent of the corporation: KATHLEEN R. BURLISON, 140 Poinsettia Drive, Kissimmee, FL 34743.

ARTICLE V INCORPORATOR

The name and Street address of the incorporator to these Articles of Incorporation is: KATHLEEN R. BURLISON, 140 Poinsettia Drive, Kissimmee, FL 34743.

THE UNDERSIGNED, as incorporator of ACCUSCRIPT, INC. has executed these Articles of Incorporation this 3rd day of February, 1998.

KATHLEEN R. BURLISON

Incorporator

ACCEPTANCE OF APPOINTMENT BY REGISTERED AGENT

Having been named as Registered Agent, and to accept service of process for the above stated corporation at the place designated above, 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 position as registered agent.

Dated this 3th day of February, 1998.

<u>Kathlien R. Burlion</u> KATHLEEN R. BURLISON

STATE OF FLORIDA COUNTY OF MARTIN

Before me personally appeared KATHLEEN R. BURLISON, to me well known and known to me to be the person described in and who executed the foregoing instrument, and acknowledged to and before me that said instrument was executed for the purposes therein expressed.

WITNESS my hand and official seal this _____day of February, 1998.

ID furnished:

DL B64251653-912-0

William Higgins, Notary Public

My Commission Expires:

WILLIAM G. HIRIGING, IH
MY COMMISSION & CS 818910
EXPINES: December 7, 1959
Bonded Tinu Notary Public Underwitters