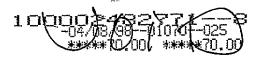
FILED 98 APR -8 PM 12: 57

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



Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

\$70.00 Filing Fee Filing Fee

& Certificate

\$122.50

\$131.25

Filing Fee,

Filing Fee & Certified Copy

Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

FROM: Thomas E Beach
Name (Printed or typed)

POBOX 3142
Address

850 224 2594

Daytime Telephone number

BANI B ** Rail

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

ARTICLES OF INCORPORATION

FILED

98 APR -8 PM 12: 57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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	on shall be:

Quality Invertigative Services Anc

ARTICLE II PRINCIPAL OFFICE

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

POBOX 3142 TACLAHASON, FI 32308

ARTICLE III SHARES

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

100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Thomas E Beach 133 Evolval Coop, Seffner, FI 33584

ARTICLE V INCORPORATOR

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

Thomas E Beach 133 Euclid LOOP

SEFFLER F1 33584

Signature/Incorporator

4-8-98

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

9-F-98