P980RAMITALISTIEN 0291

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

SUBJECT:	OMMAND TEU (Proposed co	EPHONE SE orporate name - must include	ERVICE, I	Wc.
		5	0000250° -05/01/98- ****131.25	-01062018
Enclosed is an original	and one(1) copy of the article	es 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	
		ADDITIONAL CO	PY REQUIRED	
FROM:	ROY MILLE Name (Pi	en, C.P.A.		_
		-001BY11 Ex		96 SEC
	TACKJONVIC	CE FL 32 State & Zip	AHASSEI	FILI NAY -I
	70 y 7 Daytime To	31-YPYL elephone number	E, FLORIDA	ED M 8: 32 OF STATE

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

JN5-5-98

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.

ARTICLE I NAME

The name of the corporation shall be:

Command Telephone Service, Inc.

ARTICLE II PRINCIPAL OFFICE

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

P.O. Box 1790 Middleburg, FL 32050-1790

ARTICLE III SHARES

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

1,000 Shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Philip T. White 8834-14 Goodby's Executive Dr Jacksonville FL 32217

ARTICLE V INCORPORATOR

The <u>name and address</u> of the incorporator to these Articles of Incorporation are:

Philip T. White 8834-14 Goodby's Executive Dr Jacksonville FL 32217

Signature/Incorporator

Doto

(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

Signature/Registered Agent

4/24/98 Date 98 MAY -1 MM 8: 3 SECRETARY OF STATI