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

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□ \$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: _	Jeffery W. Name (P)	Crafon rinted or typed)	-8
***		Street N Address	PH 1: 30
			<u>334</u> 1)

South east Information Systems Inc. (Proposed corporate name must include surrix)

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

5105

Articles of Incorporation Southeast Information Systems, Inc.

Pursuant to Chapter 607 of the Florida Business Corporation Act, the undersigned incorporator submits these articles of Incorporation for the purpose of forming a forprofit corporation.



The name of the Corporation is: Article 1.

Southeast Information Systems, Inc.

The principal place of business and mailing address of this corporation is: Article 2.

PO BOX 1686, Boca Raton, FL 33429

- The corporation is authorized to issue one class of stock, that being shares Article 3. of no par value, common stock, with identical rights and privileges, the transfer of which is restricted according to the bylaws of the corporation. The corporation is authorized to have 1000 shares of outstanding stock.
- The name and address of the corporation's initial registered agent is: Article 4. 11713 40th Street North, West Palm Beach, FL 33411

The name and street address of the incorporator of this corporation is: Article 5.

Spencer Kellam PO/BOX 1686, Boca Raton, FL 33429

Jeff Craton

<u>5-5-98</u>

No Director shall be held liable to the corporation or its shareholders for Article 6. monetary damages due to a breach of fiduciary duty, unless the breach is a result of self-dealing, intentional misconduct, or illegal actions.

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.

Adhy/W. Ccator Signature / Registered Agent