TRANSMITTAL LETTER

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 □ \$78.75

Filing Fee & Certificate \$122.50

\$131.25

Filing Fee & Certified Copy

Filing Fee, Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

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

FILED

ARTICLES OF INCORPORATION

98 AUG 27 AM 9: 06

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE I NAME The name of the corporation shall be:	
Berin Clerical + Printing Services, Inc.	
ARTICLE II PRINCIPAL OFFICE	
The principal place of business and mailing address of this corporation shall be: (0130 Edgewater Dr., Ste. I, Orlando, FL. 328	10
0130 Eagewater Dr., Ste. I, Ortancio, F.C. 300	
ARTICLE III SHARES The number of shares of stock that this corporation is authorized to have outstanding at any one time is:	
100 (One Hundred)	
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS	
The name and Florida street address of the initial registered agent are: Peverly Denise Wehmer	
4106 Firewater Court, Orlando, FL 32829 ARTICLE V INCORPORATOR	
The <u>name and address</u> of the incorporator to these Articles of Incorporation are:	
Severly Denise Wehmer 4106 Firewater Court, Orlando, Fl. 32829	
Sousyd Sehner 8/20/98	
/ Signature/Incorporator 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	e to act in this capacity. I further agree to comply with
the provisions of all statutes relating to the proper and complete performance	$c\overline{e}$ of my duties, and I am familiar with and accept the
obligations of my position as registered agent	-/ 1
offigations of my position as registered agent	8/20/98
Signature/Registered Agent	Date