# 8 0000 8134

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

OFFICE ADMINISTRATION Support Services, Inc.
(Proposed corporate name - must include suffix)

900002641929

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

944 Southridge Trail.

Altamonle Springs, FL- 32714 City, State & Zip

SEP 2 1 1998

F. CHESSER

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

#### ARTICLES OF INCORPORATION

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

ARTICL	EI	NAME

The name of the corporation shall be:

OFFICE ADMINISTRATION SUPPORT SERVICES, INC.

### ARTICLE II PRINCIPAL OFFICE

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

944 Southridge Track

Altamonte Springs, FL. 32714

### ARTICLE III SHARES

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

1000 Shares of common Stock @ # 1 par value

## ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Juley A. Coons-Andersen

944 Southridge Trail

Altamonte Springs, FL - 32714

## ARTICLE V INCORPORATOR

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

Juley A. Coons-Andorsen

944 Southridge Track

Altamork Springs, FL. 32714

July A Coons-Anderse

Signature/Incorporator

9-14-98

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

July A Coons-Andersu

9-14-98

Signature/Registered Agent

Date