

P98000087036

TRANSMITTAL LETTER

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

000002660180--7
-10/09/98--01042--004
*****70.00 *****70.00

SUBJECT:

ADCO SALES CORP.

(Proposed corporate name - must include suffix)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for \$70.00

FROM: Tom Potchen
4501 North Landmark
Orlando, FL 32817
407-671-6065

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

Tom
GAVE
AUTHORIZATION BY PHONE TO *Yart. 4*
CORRECT
DATE *10/12/98*
DOC. EXAM *TA*

FILED
98 OCT -9 AM 10:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TA-10/12/98

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:

ADCO. SALES CORP.

ARTICLE II PRINCIPAL OFFICE

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

4501 North Landmark
Orlando, FL 32817

ARTICLE III SHARES

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

500 Shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Tom Potchen
4501 North Landmark, Orlando, FL 32817

ARTICLE V INCORPORATOR

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

Tom Potchen
4501 North Landmark
Orlando, FL 32817



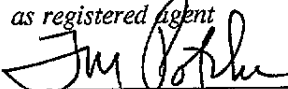
Signature/Incorporator

10/6/98

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

10/6/98

Date

SECRETARY OF STATE
TALEAHASSEE, FLORIDA

98 OCT -9 AM 10:53

FILED