1998000087091

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

98 OCT -8 PH 12: 00

closed is an origina	d and one(1) copy of the article	es of incorporation and a	a check for :	
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED	
FROM:		. Robbins inted or typed)		
	1927 NE 6th ST.			
	Address			
	Deerfield	d Beach, FL 33	3441	
	City, s	State & Zip		
	954-425-0	10 E 2		

P Hall 001 -18 1998

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

# ARTICLES OF INCORPORATION

FILED

The undersigned incorporator, for the purpose of forming a corporation under the Florida OCT -8 PM I2: 00
Business Corporation Act, hereby adopts the following Articles of Incorporation.

SECRETARY OF STATE
TALL MHASSEE, FLORIDA

## ARTICLE I NAME

The name of the corporation shall be:

Intellicade, Corp.

### ARTICLE II PRINCIPAL OFFICE

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

1927 NE 6th St. Deerfield Beach, FL 33441

#### ARTICLE III SHARES

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

1000

## ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Robert G. Robbins
1927 NE 6th St.
Deerfield Beach FL 3344

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

Robert G. Robbins 1927 NE 6th St Deerfield Beach, FL 33441

Signature/Incorporator

10-7- 95

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

10-7- 98

Date