CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32302 (850) 224-3870 1800-342-8062 • Fax (850) 222-1222

Art of Inc. File\_

L.C. File

Merger File\_

Cert. Copy\_

Photo Copy\_

Foreign Corp. File\_\_\_

Fictitious Name File\_

Art. of Amend. File\_\_

Dissolution / Withdrawal\_

Annual Report / Reinstatement

Certificate of Good Standing

Certificate of Status\_

RA Resignation\_

LTD Partnership File\_\_\_\_\_

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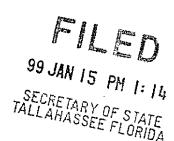
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		 Officer Search	
		 Fictitious Search	
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# ARTICLES OF INCORPORATION

of

# PLS SERVICES, INC.



#### FIRST:

The name of the Corporation shall be PLS SERVICES, INC. The principal mailing address of the corporation is 1605 Main Street, Suite 1001, Sarasota, Florida 34236.

### SECOND:

The purposes for which the corporation is formed are any and all lawful purposes for which a corporation may be formed pursuant to the laws of the State of Florida and the United States.

#### THIRD:

The corporation shall be authorized and empowered to issue TEN THOUSAND (10,000) shares of common stock.

### **FOURTH:**

The mailing address of the Registered Office of the Corporation is 1605 Main Street, Suite 1001, Sarasota, Florida 34236.

### FIFTH:

The registered agent for the corporation shall be:

STANLEY A. GOLDSMITH 1605 Main Street, Suite 1001 Sarasota, Florida 34236

## SIXTH:

To the incorporator of PLS SERVICES, INC.:

I understand my obligations as your Registered Agent and hereby accept appointment as your Registered Agent in accordance with F.S. 48.091.

STANLEY A. GOLDSMITH

# SEVENTH:

The initial Board of Directors of the corporation shall consist of one (1) member:

PATRICIA L. STEPHENS

3400 Beneva Road Sarasota, Florida	
EIGHTH:	
The incorporator of PLS SERVICES, INC., whadoption of these Articles of Incorporation, is:  PATRICIA L. STE 3400 Beneva Road Sarasota, Florida	PHENS d, #123
STATE OF FLORIDA ) COUNTY OF SARASOTA ) ss:	I: 14 FLORIT
The foregoing Articles of Incorporation of PLS SI this 14 day of Jacuary 1999, by PATRIPPERSONALLY known to me or has produced FL \$315-692-no type of identification is indicated, the above-named personally known to me or has produced FL \$315-692-no type of identification is indicated, the above-named personally known to me or has produced FL \$315-692-no type of identification is indicated, the above-named personal type of identification is indicated, the above-named personal type of identification is indicated.	ERVICES, INC., were acknowledged before me CIA_L. STEPHENS as incorporator. She is so identification and did not take an oath. If
April R Fullford  My Commission CC720729  Expires March 1, 2002	Signature of Notary Public  Priht Name of Notary Public  I am a Notary Public of the State of  Holida, and my commission  expires on 3 1 202.
STATE OF FLORIDA ) COUNTY OF SARASOTA ) ss:	
The foregoing Articles of Incorporation of PLS Staths 14 day of JA OURRY 1999, by STANLEY personally known to me or has produced no type of identification is indicated, the above-named personal states of Incorporation of PLS States of Incorporation of Incorporation of Incorporation of PLS States of Incorporation of	A. GOLDSMITH, as Registered Agent. He is as identification and did not take an oath. If
April R Fullford  * My Commission CC720729  **Commission 1, 2002	Signature of Notary Public  April R. Full Ford  Print Name of Notary Public  I am a Notary Public of the State of