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

600002862366--2: -05/04/99--01084--008 *****87.50 *****87.50

SUBJECT:	In-Depth Co	ommunication	s, Inc.	· · · ·
	(Proposed corpor	rate name - must include su	ffix)	
Enclosed is an origin	al and one(1) copy of the articles	s of incorporation and 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 PY REQUIRED	
FROM:	Paris Rogers. Name (Pr	rinted or typed)	. a .	···· ; ···· ; ···· ; ·· ; ··· ; ·· ; ··· ; ··
	Lakeland, FL City,	33 80 9 State & Zip	TARY OF HASSEE, I	SOMAY -L AM
	941 815 861		SIAIL LORID	

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

Daytime Telephone number

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ARTICLES OF INCORPORATION

The following 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: In-Depth Communications, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 1964 Farrington Drive Lakeland, FL 33809

ARTICLE III SHARES

the number of shares of stock that this corporation is authorized to have outstanding at any one time is: 100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are: Paris Rogers 1964 Farrington Drive Lakeland, FL 33809

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are: Paris Rogers 1964 Farrington Drive Lakeland, FL 33809

Signature/Incorporator

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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 relation 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 Date