

TRANSMITTAL LETTER

P99000048936

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

SUBJECT: Second Chance Telephone, Inc.  
(Proposed corporate name - must include suffix)

600002884896--2  
-05/25/99--01006--019  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

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 of Status

☐ \$78.75 Filing Fee  
& Certified Copy  
☐ \$87.50 Filing Fee,  
Certified Copy  
& Certificate of  
Status  
**ADDITIONAL COPY REQUIRED**

FROM: Patricia Rodgers  
Name (Printed or typed)

24488 Islewood DR.  
Address

Brooksville, FL 34601  
City, State & Zip

352-796-2437  
Daytime Telephone number

FILED  
99 MAY 28 PM 4:21  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

T. SMITH MAY 28 1999

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## 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: **Second Chance Telephone, Inc.**

### ARTICLE II PRINCIPAL OFFICE

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

9210 Weatherly Rd.

Brooksville, FL 34601

### ARTICLE III SHARES

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

( ONE ) 1

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Patricia Rodgers

24488 Islewood DR.

Brooksville, FL 34601

### ARTICLE V INCORPORATOR


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


Patricia Rodgers

24488 Islewood DR.

Brooksville, FL 34601

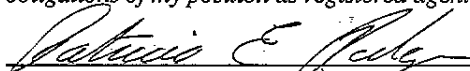
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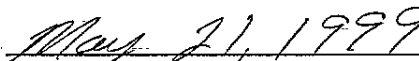
  
Signature/Incorporator

  
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

  
Date