## TRANSMITTAL LETTER

## P9900005942b

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

000002917110--5 -06/28/99--01090--003 \*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT: KWIKIE PRINT, INC  (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 Filing Fee	Filing Fee & Certificate of Status	□\$78.75 □ \$87.50  Filing Fee Filing Fee, & Certified Copy & Certificate of Status  ADDITIONAL COPY REQUIRED	99 JUN 28 AM 8: 55
FROM:	LARRY OLSO		
	801 SCENIC A BRANDON FL City, S 813-643-87	State & Zip	A A A A A A A A A A A A A A A A A A A
	Daytime Te	lephone number	and

F. OHESSER

JUN 3 U 1999

## ARTICLES OF INCORPORATION

A DISTANCE TO T		
ARTICLE I  The name of the corporation shall be:	·	
Kwikie Print, Inc.	•	95 174 174
RWING LIME, IIIC.		
ARTICLE II		HI 99 JUN 28 SECRETARY TALLAHASSE
The principal place of business and mailing add	ress of this corporation shall b	
801 Scenic Heights Drive, Brandon, FL 33511	- 	
•		
ARTICLE III		An Si
The number of shares of stock that this corpo	ration is authorized to have c	outstanding at
any one time is:		
50 Shares		
ADDICE EN		
ARTICLE IV  The name and Florida street address of the init	ial registered agent are:	
Lawrence Olson, 801 Scenic Heights Drive, Bra	ndon. FL 33511	
Lawrence Olson, 801 Seeme Heights Brive, Bri		
ARTICLE V		
The name and address of the incorporator to t	hese Articles of Incorporation	are:
Lawrence Olson, 801 Scenic Heights Drive, Bra	indon, FL 33511	<del></del> -
1/ 14/1-	6-21-99	
Find of Comparator	Date	<del></del>
Signature/Incorporator	Zuce	-
Having been named as registered agent and to accept	service of process for the above stat	ed corporation at
- the characteristic that the continue the c	he appointment as registered agent a	THE RELOCK TO MAR W.
this capacity. I further agree to comply with the provision performance of my duties, and I am familiar with and	I accept the obligations of my posi-	tion as registered
agent.		-
// //		
Inll.	6-21-99	
Signature/Registered Agent	Date	
Dialisimic Vedigicien vizerin		•