FROM:

99 JUL 15:PM 1: 18

LEUNETARY OF STATE Name of corporation: Northwest Florida Documentation Center, AHASSEE, FLORIDA

Street address of the corporation: 600 University Office Park, Suite 1B

City: Pensacola

State: Florida

ZIP: 32504

c/o

Michael L. Bowers, Incorporator P.O. Box 18591 Pensacola, Florida 32523

DEAR CORPORATION DIVISION:

PLEASE find enclosed:

- An original Articles of Incorporation and one copy for the above named 1. corporation.
- 2. A certified check or money order in the amount of \$122.50 for filing fees is attached and a certified copy of incorporation is requested.

Please send responses or receipts concerning this filing to the above address.

Thank You very much.

Michael L. Bowers, Incorporator

890 Van Kirk Ave.,

Pensacola, Florida 32503

Telephone Number: (850) 857-0202

AUTHORIZATION BY PHONE JO CORRECT QUATE DATE DOC. EXAM

Articles of Incorporation

FILED : 99 JUL 15 PM 1: 18

of

SEUNLIANT OF STATE TALLAHASSEE, FLORIDA

Northwest Florida Documentation Center, Inc.

Pursuant to Chapter 607 of the Florida Business Act, the undersigned incorporator submits these Articles of Incorporation for the purpose of forming a for-profit corporation

ARTICLE 1. The name of the Corporation is: Northwest Florida Documentation Center, Inc.

ARTICLE 2. The principal place of business and mailing address of this corporation is: 600 University Office Park, Suite 1B, Pensacola, Florida 32504 and the mailing address 1s P.O. Box 18591, Pensacola, FL 32523.

ARTICLE 3. The corporation is authorized to issue one class of stock, that stock being 100 shares of no par value, common stock, with identical rights and privileges, the transfer of which is restricted according to the bylaws of the corporation.

ARTICLE 4. The name and address of the corporation's initial Registered Agent is: Michael L. Bowers, 600 University Office Park, Suite 1B, Pensacola, Florida 32504.

ARTICLE 5. The name and street address of the incorporator of this company is: Michael L. Bowers, 890 Van Kirk Ave., Pensacola, Florida 32503.

ARTICLE 6. No Director shall be held liable to the corporation or its shareholders for monetary damages to a breach of fiduciary duty, unless the breach is a result of self-dealing, intentional misconduct, or illegal actions.

ARTICLE 7. This corporation shall have at least one (1) Director initially. The number of Director(s) may either be increased or decreased from time to time by an amendment to the bylaws of the Incorporation in the manner provided by law; but shall never be less than one (1). The name and address of the initial Director of the corporation is as follows:

Michael L. Bowers, 890 Van Kirk Ave., Pensacola, Florida 32503.

In witness whereof, the undersigned incorporator has executed these Articles of Incorporation on the date below. The undersigned incorporator hereby declares, under penalty of perjury, that the statements made in the foregoing Articles of Incorporation are true, and that the incorporator is at least eighteen years of age.

Date: July 10, 1999

Signature of Incorporator

Michael L. Bowers

Name of Incorporator

CERTIFICATE OF DESIGNATION REGISTERED OFFICE AND REGISTERED AGENT99 JUL 15 PM 1: 18

Pursuant to Section 607.0501 of The Florida Business Corporation Act, the Annual Signed RIDA corporation, organized under the laws of the State of Florida submits the Corporation and Companies of Florida submits the Corporation of the State of Florida submits the Corporation of the Corpo in designating the registered office and registered agent, in the State of Florida.

FILED

Northwest Florida Documentation Center, Inc.

1. The name and address of the corporation's registered agent and registered office is:

Michael L. Bowers

600 University Office Park, Suite 1B

Pensacola, FL 32504

Having been named as the registered agent and being designated able to accepted 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 obligation of my position as registered agent.

Date of Signature: July \$0, 1999

Signature of Registered Agent

Michael L. Bowers

Printed Name of Registered Agent