TRANSMITTAL LETTER 19900019001

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

99 AUG 30 PM 3:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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SUBJECT:	VeraPrime, Inc	ate name - must include suffix	<u></u>
Enclosed is an origina	al and one(1) copy of the article		
□ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	≤ \$78.75	\$87.50 Filing Fee, Certified Copy & Certificate of Status
FROM: Lorraine E. Hoekstra Name (Printed or typed) 1885 Blue Heron Drive Address			
	(407)255-	FL 32940 State & Zip 9045 elephone number	<u> </u>

	Please provide the original and one copy of the articles.
Foraine Hoysta GAVE	
AUTHORIZATION BY PHONE TO	*
CORRECT_UT!	
DATE 9/3/99	/ n :
DOC. EXAM Dour France	1 100

*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.

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ARTICLE I NAME

The name of the corporation shall be:

VeraPrime, Inc.

PRINCIPAL OFFICE ARTICLE II

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

1885 Blue Heron Drive Melbourne, FL 32940

ARTICLE III SHARES

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

INITIAL REGISTERED AGENT AND STREET ADDRESS ARTICLE IV

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

Lorraine E. Hoekstra 1885 Blue Heron Drive Melbourne, FL 32940

INCORPORATOR ARTICLE V

The <u>name and address</u> of the incorporator to these Articles of Incorporation are:

Lorraine E. Hockstra 1885 Blue Heron Drive Melbourne, FL 32940

(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

proine E. Hockstra Signature/Registered Agent

7/20/99