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

\$70.00

Filing Fee

-09/29/00--01096--017 \*\*\*\*\*87.50 \*\*\*\*87.50 Enclosed is an original and one(1) copy of the articles of incorporation and a check for: \$78.75 \$87.50 \$78.75 Filing Fee Filing Fee Filing Fee, & Certificate of Status

& Certified Copy Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED

900003410279--9

FROM:	DAVID KILBOURNE	TSE B
	Name (Printed or typed)	CREP
	Po Box 4223	11.E 29 ASS
	Address	1991 P. 1991 P
	FORT MYERS, FL 33918	1.088 1.088 2: 19
	City, State & Zip	New York
	941-336-5022	

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

Daytime Telephone number



## ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit) ARTICLE I NAME The name of the corporation shall be: Coupon BOOKLETS, INC ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: POBOX 4223 FORT MYERS FL 33918 ARTICLE III PURPOSE The purpose for which the corporation is organized is: Advert 151NG ARTICLE IV SHARES The number of shares of stock is: 1000 ARTICLE V INITIAL OFFICERS DIRECTORS (optional) The name(s) and address(es): ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is: DAVID KILBOURNE 13180 N, CLEVELAND AVE #112 FORT MYERS, FL 33903 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: DAVID KILBOURNE PO BOX 4223 FORT MYERS FL 33918

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Signature/Registered Agent DAVID KILBOURNE