

PO2000015634

TRANSMITTAL LETTER

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

500004784155--1
-01/18/02--01037--023
*****78.75 *****78.75

SUBJECT: Coupon Redemption Center, Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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: Chris Brisson
Name (Printed or typed)

P.O. Box 589
Address

Boca Raton, FL 33429
City, State & Zip

2554-621-
1002-2281

2002 FEB 11 AM 9:33
FILED
SECRETARY OF STATE
TALLAHASSEE FLORIDA

✓
2/12/02



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

FILED
2002 FEB 11 AM 9:33
SECRETARY OF STATE
TALLAHASSEE FLORIDA

January 28, 2002

CHRIS BRISSON
POST OFFICE BOX 569
BOCA RATON, FL 33429

SUBJECT: COUPON REDEMPTION CENTER, INC.
Ref. Number: W02000002281

We have received your document for COUPON REDEMPTION CENTER, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must have a Florida street address. A post office box, personal mail box (PMB), or mail drop-box address is not acceptable.

You must list at least one incorporator with a complete business street address.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6973.

Claretha Golden
Document Specialist
New Filings Section

Letter Number: 502A00004623

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED

2002 FEB 11 AM 9:33

SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

Coupon Redemption Center, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

P.O. 569
Boca Raton, FL. 33429

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Fundraising

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

monica Brisson
1175 Highland Beach Drive
Highland Beach, FL 33487
Boca Raton, FL 33429

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Chris Brisson
P.O. Box 569
Boca Raton, FL 33429

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

Monica Brisson
Signature/Registered Agent

1/14/02
Date

Chris Brisson
Signature/Incorporator

1/14/02
Date

2002 FEB 11 AM 9:33
SECRETARY OF STATE
TALLAHASSEE FLORIDA

FILED