## F0644069536

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	· #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

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MAY 15 P 3: 05
SECRETARY OF STATE
AND ASSEE, FLORIDA

## **COVER LETTER**

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

SUBJECT:	VIBRASONIC - COM, IN	rc.	
	(PROPOSED CORPORA)		UDE SUFFIX)
PT	* * 1 (1) 0.5 (*	1	
	ginal and one (1) copy of the artic	les of incorporation and	a check for:
<b>V</b> \$70.00	S78.75 Filing Fee	\$78.75 Filing Fee & Ccrtified Copy	□ \$87.50
Filing Fee	Filing Fee	Filing Fee	Filing Fee,
	& Certificate of Status	& Ccrtified Copy	Certified Copy
			& Certificate of Status
		ADDITIONAL CO	
FROM:	MARK WEITHORN		
	Name (	Printed or typed)	
	1/700 - 5 12	A	
	16200 NE 13	ddress	19
	NORTH MIANI ROLL	VII 6, 331	141
	NONTH MATI BEA	State & Zip	
	305-948-23 Daytime Te	"	
	Daytime Te	lephone number	-· - · · · ·

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

ARTICLES OF INCO: In compliance with Chapter	607 and/or Chapter 621,	F.S. (Profit)	FILED	
ARTICLE I NAME		2001		
The name of the corporation	shall be:	- OU MA	16 D.	
VIBRASONIC. COM, IN		TALLAHAS	Y 16 P 3: 05 ARY OF STATE SSEE, FLORIDA	
ARTICLE II PRINCI		· · · · · · · · · · · · · · · · · ·	LURIDA	
The principal place of busine	ss/mailing address is:		•	-
16200 NO 13 A	, ve-			
NORTH MIAMI BUNG	in, FL 33162			
ARTICLE III PURPO		No.		
The purpose for which the c	orporation is organized is	<b>;:</b>		
INTERNOT SALES				
ARTICLE IV SHAR	ES			
The number of shares of stoc				•
ARTICLE V INITIA	L OFFICERS AND/OR	DIRECTORS	<u></u>	
List name(s), address(es) an	id specific title(s):		• •	•
MARK WEITHORN				
1130 STILLWATER		-		
MIATI BUNCH, FL	3314)			
ARTICLE VI REGI	STERED AGENT			
The name and Florida stree	ot address (D.O. Pay NOT	(acceptable) of the r	registered agent is:	
SAME AS ABU	~ Mart W	ei thorn		
	1/スカぐも)	WHER DE		
	Miami	Bch, F1.33	3/4/	
	RPORATOR	<u>.</u>	r sere i	
The name and address of the	le Incorporator is:	is allenn		
SAME AS ABOU	o Mark W	Master Dr	<b>-</b> ,	
	1130 870	110410 41	~ ~ 7/1//	
	Miam:	12 CA ****************	33141 *******	******
*********		ocess for the above state	d corporation at the place de	signated in thi
Having been named as registered	l agent to accept service of pro accept the appointment as regi	istered agent and agree	to act in this capacity	
************************** Having been named as registered certificate, I am familiar with and	l agent to accept service of pro accept the appointment as reg	istered agent and agree	to act in this capacity	