P999981469

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

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SUBJECT: TRADE TECH INC. (Proposed corporate name - must include suffix)								
Enclosed is 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	S\$78.75 Filing Fee & Certified Copy ADDITIONAL COP	\$87.50 Filing Fee, Certified Copy & Certificate of Status Y REQUIRED					
FROM:	PETER Jay R Name (Pri 1105 FT CLARKE A GALAGES VILLE FL City, S (352) 331-3158	BLUD. APT 113 ddress	99 SEP -8 AM 11: 24 SECRETARY OF STATE TALLAHASSEE, IT CRIDE					

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

9,50

ARTICLES OF INCORPORAT

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.							
ARTICLE I	NAME	TRACE TE	ech	INC.			

TRADE TECH



ARTICLE II PRINCIPAL OFFICE

The name of the corporation shall be:

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

BLUD APT 113 FT. CLARKE GAINESUILLE FL 32606

<u>ARTICLE</u> III SHARES

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

1,000

INITIAL REGISTERED AGENT AND STREET ADDRESS

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

PETER JAY RODARBUEZ BLUDO APT 113 1105 FT CLARKE

GASWESUFLLE

The name and address of the incorporator to these Articles of Incorporation are:

PETER JAY RODRIGIES 1105 FT CLAOKE BLUD APT 113 GAINESVILLE 32606

Date

(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

Signature/Registered Agent

Date