

TRANSMITTAL LETTER

P0000026989

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

FILED

00 MAR 16 PM 2:56

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SUBJECT:

Total Focus Inc.

(Proposed corporate name - must include suffix)

100003134431--9

-02/14/00--01089--009

*****87.50 *****87.50

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

☐ \$78.75
Filing Fee
& Certified Copy

☒ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM:

Amber Smith

Name (Printed or typed)

PO Box 8576

Address

Jacksonville FL 32211

City, State & Zip

215-491-0672

Daytime Telephone number

189,3544.550.85263580
M/00-4525

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

D. BROWN MAR 16 2000



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

February 18, 2000

AMBER SMITH
POST OFFICE BOX 8576
JACKSONVILLE, FL 32239-8576

SUBJECT: ALPHA OMEGA CORP.
Ref. Number: W00000004525

We have received your document for ALPHA OMEGA CORP. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

YOU SENT IN ARTICLES OF INCORPORATION AND NO INFORMATION ONLY YOUR SIGNATURE. YOU NEED TO COMPLETE ARTICLES I - V AND SIGN IN BOTH PLACES. MAKE THE NECESSARY CORRECTIONS ALONG WITH CHOOSING A NEW NAME AND RETURN TO ME WITH A COPY OF THIS LETTER.

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with an address and telephone number where you can be reached during working hours.

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) 487-6972.

Doris Brown
Document Specialist

Letter Number: 500A00008786

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.

ARTICLE I NAME

The name of the corporation shall be:

Total Focus Inc

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TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

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

Po Box 8576
JACKSONVILLE FL 32239

ARTICLE III SHARES

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

1000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

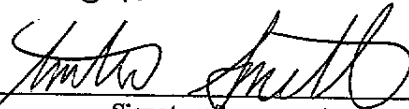
The name and Florida street address of the initial registered agent are:

PEPE SHERMAN
8090 ATLANTIC BLVD H-79
JACKSONVILLE FL 32211

ARTICLE V INCORPORATOR

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

AMBER SMITH
PO Box 8576
JACKSONVILLE FL 32211



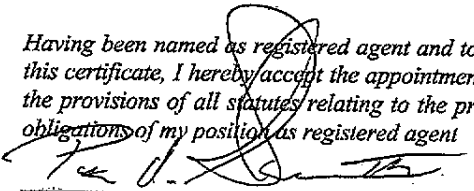
Signature/Incorporator

2/11/00

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

MAR 07 00

Date