

## TRANSMITTAL LETTER

P00000030291

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

SUBJECT: Schang Internet Communications, Inc.  
(Proposed corporate name - must include suffix)

8000003175668--9  
-03/20/00--01084--014  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

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: CHRIS SCHANG  
Name (Printed or typed)  
P.O. Box 11423  
Address  
Pensacola, Florida 32524  
City, State & Zip  
(850) 505-0176  
Daytime Telephone number

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

00 MAR 20 AM 8:15

FILED

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

T. Burch MAR 27 2000

# 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:

SCHANG INTERNET COMMUNICATIONS, INC.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

Business Address: 5740 Homewood Rd. Pensacola, Florida 32504

Mailing Address: P.O. Box 11423 Pensacola, Florida 32524

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Internet services provider

## ARTICLE IV SHARES

The number of shares of stock is:

1 (one)

## ARTICLE V INITIAL OFFICERS/DIRECTORS

The name(s) and address(es):

none

## ARTICLE VI REGISTERED AGENT

The name and Florida street address registered agent are:

CHRISTOPHER M. SCHANG 5740 Homewood Rd. Pensacola, Florida 32504

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator are:

CHRISTOPHER M. + MARY A. SCHANG 5740 Homewood Rd. Pensacola, Florida 32504

\*\*\*\*\*  
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

Signature/Incorporator

Date

Date

FILED  
00 MAR 20 AM 8:15  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA