

TRANSMITTAL LETTER

P000000031502

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

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-03/24/00--01084--002
*****78.75 *****78.75

SUBJECT: GLOBAL GOLF Resources, 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

☐ \$78.75 Filing Fee & Certified Copy
☐ \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED

FROM: Jerry L Williams
Name (Printed or typed)

10701 KNOLLSWAY CT.
Address

Tampa FL 33625
City, State & Zip

813 962 - 3834
Daytime Telephone number

FILED
2000 MAR 24 PM 12:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

OK 3/29

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:

GLOBAL GOLF Resources, Inc.

ARTICLE II PRINCIPAL OFFICE
The principal place of business/mailling address is:

10701 KNOLLSWAY CT
TAMPA FL 33625

ARTICLE III PURPOSE
The purpose for which the corporation is organized is:

INTERNET Services, Sales
& MARKETING

ARTICLE IV SHARES
The number of shares of stock is:

7,500 shares @ \$1.00 Par value

ARTICLE V INITIAL OFFICERS/DIRECTORS

The name(s) and address(es): President Bill Scherneck
1200 NW. 73rd Terr.
OCALA FL 33482

CEO Jerry Williams
10701 KNOLLSWAY CT
TAMPA FL 33625

ARTICLE VI REGISTERED AGENT

The name and Florida street address registered agent are:

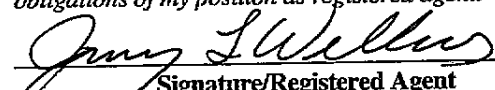
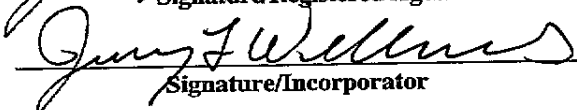
Jerry Williams
10701 KNOLLSWAY CT
TAMPA FL 33625

ARTICLE VII INCORPORATOR

The name and address of the Incorporator are:

Jerry Williams
10701 KNOLLSWAY CT
TAMPA FL 33625

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

3/22/00

Date

3/22/00

Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2000 MAR 24 PM 12:53

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