TRANSMITTAL LETTER

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

SUBJECT:	BUZ (one	ate name - must include suf	* ÷ ÷	
	·	20	00031900 -03/30/0001 *****78.75	
Enclosed is an originate	al and one(1) copy of the articles	s of incorporation and a c	heck for:	
□ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	□ \$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
FROM:				
	PO Box 20	63 Address		
	0.110	32175 State & Zip		

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

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.

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TALLAR STATE FLORIDA

ARTICLE	I.	NAME

The name of the corporation shall be:

BYZ CONEX INC.

ARTICLE II	PRINCIPAL	OFFICE
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The principal place of business and mailing address of this corporation shall be:

mailing address: PO BOX 263 Ormand FL 32175 103 Lucky Dr. Ormond FL 32176

ARTICLE III SHARES

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

one Hundred

INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Glenn E. Spielman mailing address!

103 Lucky Dr.

Po Box 263

Ormand FL 32

PO BOX 263

Ormand FL 32175

ARTICLE V INCORPORAT

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

Tracie m. mc Guiro P.O. BOX 263 Ormond FZ 3#1

(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