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TRANSMITTAL LETTER

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

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-05/01/00--01102--014
*****78.75 *****78.75

Subject Virtual e-clipse designs, Inc.

Enclosed is an original and one (1) copy of the articles of incorporation and a check for

☒ \$78.75
Filing Fee
& Certified Copy

☐ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

(ADDT'L COPY REQ'D)

(ADDT'L COPY REQ'D)

FROM:	Philip K. Akalp
	29395 Agoura Road, Suite 204
	Agoura Hills, California 91301

FILED
00 MAY -1 AM 9:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NOTE: Please provide the original and one copy of the articles. Provide TWO copies if you have requested a certified copy as designated in the boxes above.

CP
5-2-00
2

ARTICLES OF INCORPORATION
OF
Virtual e-clipse designs, Inc.

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: Virtual e-clipse designs, Inc.

ARTICLE II PRINCIPAL OFFICE

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

2309 South Clewis Ct # 5
Tampa, Florida 33629

ARTICLE III SHARES

The number of shares that this corporation is authorized to have outstanding at any one time is: 1,500 shares at \$1.00 par value per share.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

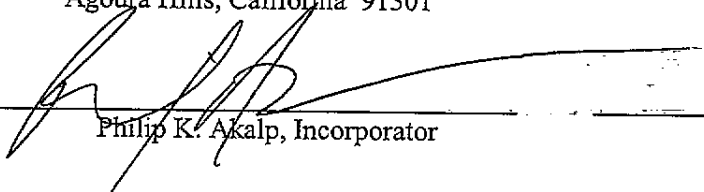
The name and Florida street address of the initial registered agent is:

Jaime E. Sanchez
2309 South Clewis Ct # 5
Tampa, Florida 33629

ARTICLE V INCORPORATOR

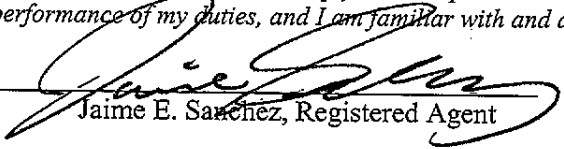
The name and address of the incorporator to these Articles of Incorporation is:

Philip K. Akalp
29395 Agoura Road, Suite 204
Agoura Hills, California 91301


Philip K. Akalp, Incorporator

4/21/2000
Date

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.


Jaime E. Sanchez, Registered Agent

4/26/2000
Date

FILED
MAY - 1 AM 9:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA