POOCOOOT/369 TRANSMITTAL LETTER

| Department of State Division of Corporatio P.O. Box 6327 Tallahassee, FL 32314 SUBJECT: | - | - must include suffer | DO JUL 24 PM 3:38 |
|---|---|---|---|
| Enclosed is an original | and one (1) copy of the a | - | OA B |
| □ \$70.00 Filing Fee | □ \$78.75 Filing Fee & Certificate | \$122.50 Filing Fee & Certified Copy ADDITIONAL CO | \$131.25 Filing Fee, Certified Copy & Certificate PY REOURED |
| FROM: | Nell-Anne Burke Name (Printed P O Box 691777 | of typed) 1 🗀 🗆 | 0033340414 -07/24/0001142006 *****131.25 ****** |
| _ | Addres Onlando, FL 32869 City, State | | |
| _ | 407 438-8845 | | · . |
| | Daytime Telepho | ne number | |

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

9/1/26

109

ARTICLES OF INCORPORATION

| 1. The name of the corporation shall be: DIRECT GLOBAL, INC |
|--|
| 2. The principal place of business and mailing address of the corporation is: 14202 Hogan Dr., Onlando, FL 32837; PO Box 691777, Onlando, FL 32869 |
| 3. The corporation shall have the authority to issue shares of stock. |
| 4. The registered agent of the corporation is <u>NeLL-Anne Bunke</u> and the |
| registered street address is 14202 Hogan Dr., Onlando, FL 32837 |
| Florida <u>32837</u> . |
| 5. The initial Board of Directors shall have / member(s) whose name(s) and address(es) is/are as follows: Nell-Anne Bunke |
| P O Box 691777 |
| Onlando, FL 32869 |
| The number of directors may be raised or lowered by amendment of the bylaws of the corporation but shall in no case be less than one. 6. The incorporator of this corporation is Nell-Anne Bunke whose street address is 14202 Hogan Dr., Onlando, FL 32837 |
| Dated 7/16/00 38 38 38 |
| <u>Jell-lune</u> Surke Incorporator |
| 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 am familiar with and accept the obligations of my position as registered agent. Dated |
| Registered Agent |