

TRANSMITTAL LETTER  
**P00000076087**

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

300003347493--0  
-08/07/00--01098--001  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

SUBJECT: INTERNATIONAL PROMOTIONS, 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: ANTHONY T LEON  
Name (Printed or typed)  
45 Central Ct  
Address  
Tarpon Springs Fl 34689  
City, State & Zip  
(727) 942-0330  
Daytime Telephone number

FILED  
00 AUG -7 AM 8:43  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

Anthony T. Leon GAVE

AUTHORIZATION BY PHONE TO

CORRECT Name

DATE 8-11

WGC EXAM Lee

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

T BROWN AUG 11 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:

INTERNATIONAL PROMOTIONS, INC.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

45 Central Ct  
Tarpon Springs Fl 34689

Mail: P O Box 490  
Tarpon Springs Fl 34688

FILED  
00 AUG -7 AM 8:44  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

This corporation may, and is authorized to, engage in any activity or business permitted under the laws of the United States and of the state of Florida.

## ARTICLE IV SHARES

The number of shares of stock is: 1000

## ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

JOHN TURNER PRES./DIR.  
TONY LEON VP/SECY/TREAS/DIR

## ARTICLE VI REGISTERED AGENT

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

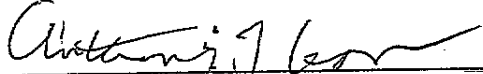
ANTHONY T LEON  
45 Central Ct  
Tarpon Springs Fl 34689

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:


AILEEN B DELEHANTY  
7300 Mackerel Ln  
Hudson Fl 34667

\*\*\*\*\*  
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

  
Signature/Registered Agent Anthony T Leon

8/3/2000

Date

  
Signature/Incorporator Aileen B Delehanty

8/3/2000

Date