

TRANSMITTAL LETTER

P00000080774

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

200003365672--7
-08/21/00--01077--012
*****78.75 *****78.75

SUBJECT:

Immortal Mail 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:

Gary + Donna Greer
Name (Printed or typed)

3104 Kings Lake Blvd
Address

Naples Florida 34112
City, State & Zip

(941) 732-6581
Daytime Telephone number

FILED
00 AUG 21 PM 2:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

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:

~~The~~ Immortal Mail ~~LLC~~ Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

3104 Kings Lake Blvd
Naples Florida USA
34112

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

to deliver e-mail message services

ARTICLE IV SHARES

The number of shares of stock is: 25 000 000 = (twenty five million)

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

Gary Samuel Greer + Donna Lynn Greer
3104 Kings Lake Blvd
Naples, Florida USA 34112

ARTICLE VI REGISTERED AGENT

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

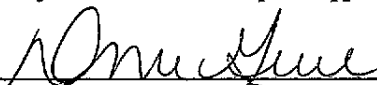
Donna Lynn Greer
3104 Kings Lake Blvd.
Naples Florida USA 34112

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Gary Samuel Greer
3104 Kings Lake Blvd
Naples Florida USA 34112

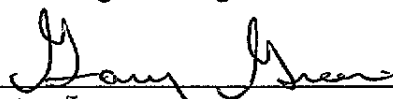
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent Donna Lynn Greer

8-16-00

Date



Signature/Incorporator Gary Samuel Greer

8-16-00

Date

FILED
00 AUG 21 PM 2:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA