

TRANSMITTAL LETTER

P00000105455

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

Cyber Fund. *Incorporated*
EIN 59-3679035

500003458765--4
-11/09/00--01061--007
*****70.00 *****70.00

SUBJECT:

(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:

Terrence J. Moons

Name (Printed or typed)

1052 Montgomery Road, Suite 131

Address

Altamonte Springs, FL 32714

City, State & Zip

407-260-1919

Daytime Telephone number

Terrence Moons GAVE
AUTHORIZATION BY PHONE TO
CORRECT corp suffix
DATE 11-13-00
DOC. EXAM aj

FILED
NOV -9 AM 9:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

aj 11/13

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:

Cyber Funds Incorporated

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

1052 Montgomery Road, Suite 131

Altamonte Springs, FL 32714

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Financial Services (For Profit)

ARTICLE IV SHARES

The number of shares of stock is:

1,000

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

Terrence J. Moons, CEO & Director

1052 Montgomery Road, Suite 131

Altamonte Springs, FL 32714

Miriam E. Moons, Secretary & Director

1052 Montgomery Road, Suite 131

Altamonte Springs, FL 32714

ARTICLE VI REGISTERED AGENT

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

Miriam E. Moons

1052 Montgomery Road

Altamonte Springs, FL 32714

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Terrence J. Moons

1052 Montgomery Road, Suite 131

Altamonte Springs, FL 32714

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

Miriam E. Moons
Signature/Registered Agent

11/7/00
Date

[Signature]
Signature/Incorporator

11/07/2000
Date

FILED
00 NOV -9 AM 9:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA