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	nal and one(1) copy of the article		
☐ \$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
		ADDITIONAL CO	Status PY REQUIRED
FROM	1: Kobset Of Name (P.	FINAUSER rimted or typed)	
	P.O. Box /	0/293 Address	
	CAPE CORAL	State & Zip	2/1 SECRETARY
	941-910-	265/ elephone number	SEE FLO
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/ 1	NOTE: Please provide the or	iginal and one copy of t	the articles
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FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

December 12, 2000

ROBERT OFFENHAUSER P.O. BOX 101293 CAPE CORAL, FL 33910

SUBJECT: SUPERSAVER INC. Ref. Number: W00000029146

We have received your document for SUPERSAVER INC.. However, the document has not been filed and is being returned for the following:

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6934.

Loria Poole Corporate Specialist

Letter Number: 700A00062647

<u> </u>			
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:			
Supersauer Tolons INC, TNC,			
ARTICLE II PRINCIPAL OFFICE			
The principal place of business/mailing address is:			
Con Contact Co			
5107 Santa Rosa Ct. Unit 2A / P.O. Box 101293 Cape Coral, FL 33904 Cape Coral, FL 33916 ARTICLE III PURPOSE			
The purpose for which the corporation is organized is:			
FOR PROFIT Advertising AGENCY			
ARTICLE IV SHARES			
The number of shares of stock is:			
100			
ARTICLE V INITIAL OFFICERS DIRECTORS (optional) The name(s) and address(es):			
Robert Offenhauser 5107 Santa Rosa C+ #2A Cape Gral, FL 33904			
CAPE GRAL, FL 33904			
ARTICLE VI REGISTERED AGENT			
The name and Florida street address of the registered agent is:			
$(1)(1 \times 0)$			
5107 SANTA ROSA Ct. #2A			
Kobert Ottenhauser 5107 Santa Rosa Ct. #ZA CAPE Coral, FL 33904 ARTICLE VII INCORPORATOR			
The name and address of the Incorporator is:			
Robert Office Laures			
SIOT SANTA ROSA CT #ZA			
CAPE COLIFICATION S 3 5 7 9 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4			
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			

Robert L-07/enhaush Signature/Incorporator/Registered Agent