TRANSMITTAL LETTER

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

SUBJECT: Tech Master of Mani Inc.
(Proposed corporate name - must include suffix)

SECRETARY OF STATE VISION OF CORPORATIONS

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

S70.00 Filing Fee

\$78.75

Filing Fee

& Certificate of Status

ZS78.75

Filing Fee & Centified Copy \$87.50

Filing Fee, Certified Copy

& Certificate of

Status

ADDITIONAL COPY REQUIRED

FROM: Robert Hashagen
Name (Frinted or typed)

29 S. E. 10th Street Profite Theh
Address

Pees Cie & Beh Fl. 33441
City, State & Zip

954 -564-3500 Daysime Telephone number

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

8 1/11/01

ARTICLES OF INCORPORATION

FILED STATE
SECRETARY OF STATE
DIVISION OF CORPORATIONS

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

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ARTICLE I NAME	
The name of the corporation shall be:	
Tech Master of Miami Inc.	
ARTICLE II PRINCIPAL OFFICE	
The principal place of business and mailing address of this corporation shall be:	
29 S.E. 10th street Deer Geld Bh Pl. 33441	
ARTICLE III SHARES	
The number of shares of stock that this corporation is authorized to have outstanding at any one time is:	
/000	
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS	
The name and Florida street address of the initial registered agent are: Check Left cress	,
chery Hallagen	
Cheryl Hashagen 28 S.E. 10th Street Peartie 18 33441	
ARTICLE V INCORPORATOR	
The name and address of the incorporator to these Articles of Incorporation are:	
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29 S. E 10K Street Deer Gie le Bh. M. 73441	
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Ald Hele Oils 0,105/01	
Signature/Information Date	
P. Company of the Gray	
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(An additional article must be added if an effective date is requested.)

Having been numed 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 I am familiar with and accept the obligations of my position as registered agent

Signature/Registered Agent

Date