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TRANSMITTAL LETTER

FILED

01 JAN 29 AM 8:57

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

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-01/29/01--01102--007  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT:

Hat Trick Media, 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

☐ \$122.50  
Filing Fee  
& Certified Copy

☐ \$131.25  
Filing Fee,  
Certified Copy  
& Certificate

ADDITIONAL COPY REQUIRED

FROM:

Richard Joseph Hickman III

Name (Printed or typed)

628 Cape Cod Circle

Address

Valrico, Florida 33594

City, State & Zip

(813) 653-4706

Daytime Telephone number

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

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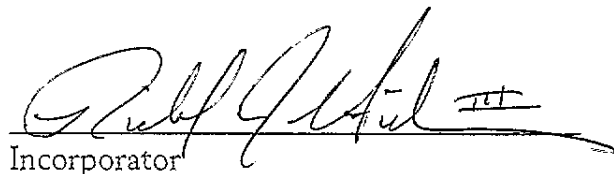
ARTICLES OF INCORPORATION

1. The name of the corporation shall be: Hat Trick Media, Inc.
2. The principal place of business and mailing address of the corporation is: 628 Cape Cod Circle, Valrico, Florida 33594
3. The corporation shall have the authority to issue 100 shares of stock.
4. The registered agent of the corporation is Richard J. Hickman III and the registered street address is 628 Cape Cod Circle, Valrico, Florida 33594.
5. The initial Board of Directors shall have 2 member(s) whose name(s) and address(es) is/are as follows: Richard J. Hickman III / Lisa M. Hickman  
628 Cape Cod Circle / 628 Cape Cod Circle  
Valrico, FL 33594 / Valrico, FL 33594

The number of directors may be raised or lowered by amendment of the bylaws of the corporation but shall in no case be less than one.

6. The incorporator of this corporation is Richard J. Hickman III whose street address is 628 Cape Cod Circle, Valrico, FL 33594

Dated 1-5-01

  
Incorporator

Having been named 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 am familiar with and accept the obligations of my position as registered agent.

Dated 1-5-01

  
Registered Agent