

## TRANSMITTAL LETTER

P01000016215

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

900003674509--  
 -02/12/01-01106-020  
 \*\*\*\*70.00 \*\*\*\*70.00

SUBJECT: TRUE SOUNDS 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: VALENTINA STOUPAK  
 Name (Printed or typed)

401 GOLDEN ISLES DR. #402  
 Address

HALLANDALE FL 33009  
 City, State & Zip

(954) 456-1154  
 Daytime Telephone number

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

01 FEB 12 PM 12:10  
 SECRETARIAL TALLAHASSEE, FLORIDA  
 FILED

## 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:

TRUE SOUNDS INC.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

401 GOLDEN ISLES DR #402  
MALLANDALE FL 33009

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

SALES OF AUDIO AND  
ELECTRONICS ON THE INTERNET

### ARTICLE IV SHARES

The number of shares of stock is:

ONE

### ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

VALENTINA STOUPAK  
401 GOLDEN ISLES DR #402  
MALLANDALE FL 33009

### ARTICLE VI REGISTERED AGENT

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

VALENTINA STOUPAK  
401 GOLDEN ISLES DR #402  
MALLANDALE FL 33009

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

VALENTINA STOUPAK  
401 GOLDEN ISLES DR #402  
MALLANDALE FL 33009

\*\*\*\*\*  
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

N. Stoupak  
Signature/Registered Agent / Incorporator

02/08/01

Date

FILED  
01 FEB 12 PM 12: 10  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA