## TRANSMITTAL LETTER 010000 43513

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

Subject Word of Mout

Word of Mouth Advertising Inc.

Enclosed is an original and two (2) copies of the articles of incorporation and a check for

\$78.75 Filing Fee & Certified Copy

\$122.50 Filing Fee & Certified Copy

Filing Fee, Certified Copy & Certificate

\$131.25

(ADDT'L COPY REQ'D)

(ADDT'L COPY REQ'D)

FROM:	Nellie Akalp	
	30141 Agoura Road, Suite 205 Agoura Hills, California 91301	7000040849070 -04/27/0101050006
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OI APR 27 PM I2: 29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

F. GHESSEN

MAY 1 2000

NOTE: Please provide the original and one copy of the articles. Provide TWO copies if you have requested a certified copy as designated in the boxes above.

## ARTICLES OF INCORPORATION OF Word of Mouth Advertising Inc.

The undersigned incorporator, for the purpose of forming a corporation under the Florida business Corporation Act, hereby adopts the following articles of incorporation.

ARTICLE I NAME

The name of the Corporation shall be: Word of Mouth Advertising Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

2445 Pigeon Cay West Palm Beach, Florida 33411

ARTICLE III SHARES

The number of shares that this corporation is authorized to have outstanding at any one time is: 1,500 at \$1.00 par value per share.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Lucas Moore Bancroft 2445 Pigeon Cay West Palm Beach, Florida 33411

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation is:

Nellie Akalp 30141 Agoura Road, Suite 205 Agoura Hills, California 91301

Nellie Akalp, Incorporator

4/17/01

Date

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 I am familiar with and accept the obligations of my position as registered agent.

ucas Moore Bancroft, Registered Agent

Date