TRANSMITTAL LETTER

FILED OI MAY 16 AM II: 05

SECRETARY OF STATE TALLAHASSEE, FLORIDA

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

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SIRTECT. Independent Dealer Network. Inc.				
SUBJECT: Independent Dealer Network, 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	\$78.75	□ \$78.75	\$87.50	
Filing Fee	Filing Fee & Certificate of	Filing Fee & Certified Copy	Filing Fee, Certified Copy	
	Status	& Certified Copy	& Certificate	
	Diamo			
		ADDITIONAL CO	PY REQUIRED	
Les Gardi CPA FROM:				
Name (Printed or typed)				
7061C S Tamiami TRail Address			- • • • • • • •	
Sarasota, FL 34231				
City, State & Zip			<u>.</u>	

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

Daytime Telephone number

941 925-2099

ARTICLES OF INCORPORATION

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:

Independent Dealer Network, Inc.

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ARTICLE II PRINCIPAL OFFICE

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

7061C S Tamiami Trail Sarasota, FL 34231

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

10,000 Shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Les Gardi, CPA

7061C S Tamiami Trail

ARTICLE V INCORPORATOR

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

Gregory R Markus 337 Passageway Opprey, FL 34229

Signature/Incorporator

5/12/01

Date

(An additional article must be added if an effective date is requested.)

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

Signature/Registered Agent

5/12/01

Date