

TRANSMITTAL LETTER

PO1000054733

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

SUBJECT: WHISPERETA, Inc.

(Proposed corporate name - must include suffix)

100004323241--1
-05/25/01--01042--012
*****78.75 *****78.75

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: Elizabeth Piccione
Name (Printed or typed)

5956 BENT PINE DR. # 259
Address

ORLANDO, FL . 32822
City, State & Zip

407-737-6556
Daytime Telephone number

FILED
01 MAY 25 PM 12:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

JUN 04 2001

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:
Whispereta, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:
4300 S. Semoran Blvd. Suite #202
Orlando, Fl. 32822

ARTICLE III SHARES

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

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:
Elizabeth Piccione
5956 Bent Pine Dr. Apt.No. 259
Orlando, Fl. 32822

ARTICLE V PURPOSE

The purpose or purposes for which the corporation is organized are to conduct any lawful business.

ARTICLE VI INCORPORATOR

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

Elizabeth Piccione
5956 Bent Pine Dr. Apt.No. 259
Orlando, Fl. 32822


Signature/Incorporator

5/23/01
Date

Having been named as registered agent and to accept services 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

5/23/01
Date

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TALLAHASSEE, FLORIDA