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TRANSMITTAL LETTER

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01 JUN -7 AM 9:42

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

SECRETARY OF STATE
TALLAHASSEE FLORIDA

SUBJECT: TRIBE CITY GROUP, inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

700004375777-5
-06/07/01--01078--015
*****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: Ryan Dekker Dreyer
Name (Printed or typed)

919 Magnolia ST.
Address

New Smyrna Bch., FL 32168
City, State & Zip

(386) 426-0426
Daytime Telephone number

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

D. WHITE JUN 12 2001

3✓

ARTICLES OF INCORPORATION
OF
TRIBE CITY GROUP, inc.

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt the following Articles of Incorporation.

ARTICLE I - NAME

The name of the corporation shall be:
TRIBE CITY GROUP, inc.

ARTICLE II - PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:
919 Magnolia St. New Smyrna Bch., FL 32168

ARTICLE III - CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 100,000,000

ARTICLE IV - INITIAL REGISTERED AGENT
AND STREET ADDRESS

The name and address of the initial registered agent is:

Ryan Dreyer
919 Magnolia St.
New Smyrna Bch., FL 32168

ARTICLE V - INCORPORATORS

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

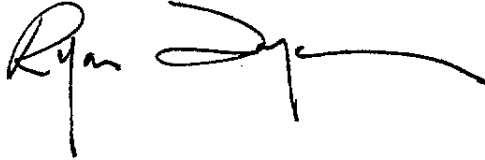
Ryan Dreyer
919 Magnolia St.

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TALLAHASSEE FLORIDA

New Smyrna Bch., FL 32168

The undersigned incorporator has executed these Articles of Incorporation
this 25th day of May, 2001.

Ryan Dreyer
(Name)



Acknowledged before me on the 4 th day of June, 2001:
Ryan Dreyer who produced valid Florida Drivers License as
identification, and who executed said instrument for the purposes therein
expressed.

Martha A. Radune
NOTARY PUBLIC, STATE OF FLORIDA

Name: MARTHA A. RADUNE

Commission No.: CC814410

My Commission Expires: March 5, 2003

I hereby accept the designation as registered agent:



The initial registered office is:

919 Magnolia St.
New Smyrna Bch., FL 32168



MARTHA A. RADUNE
Notary Public, State of Florida
My Comm. Exp. Mar. 5, 2003
Comm. No. CC 814410

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TALLAHASSEE FLORIDA