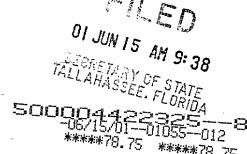
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TRANSMITTAL LETTER

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



Subject

Primus 9 Technologies, Inc.

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

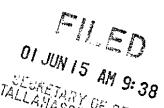
 S122.50 S131.25

Filing Fee Filing Fee,
& Certified Copy & Certificate
(ADDT'L COPY REQ'D) (ADDT'L COPY REQ'D)

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

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 Primus 9 Technologies, Inc.



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

ARTICLE I NAME

The name of the Corporation shall be: Primus 9 Technologies, Inc.

ARTICLE II PRINCIPAL OFFICE

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

329 Johns Glen Dr. Jacksonville, Florida 32259

ARTICLE III SHARES

The number of shares that this corporation is authorized to have outstanding at any one time is: 4,000 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:

Michael Thad Irvin 329 Johns Glen Jacksonville, Florida 32259

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

/2/8/6(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.

Michael Thad Irvin, Registered Agent

<u>6-12-01</u>

Date