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SECRETARY OF STATE TALLAHASSEE FLORIDA

TRANSMITTAL LETTER

DEPARTMENT OF STATE DIVISION OF CORPORATIONS P O BOX 6327 TALLAHASSEE, FL 32314

SUBJECT: ECHO GIFTS INC

ENCLOSED IS AN ORIGINAL AND ONE (1) COPY OF THE ARTICLES OF INCORPORATION AND OUR CHECK FOR 122.50

FROM:

MIYOUNG EDMONDS

800 STANLEY ST

PENSACOLA FL 32503

1-850-438-9239

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****122.50 *****78.75

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SECRETARY OF STATE FALLAHASSEE FLORIDA

ARTICLE OF INCORPORATION

<u>OF</u>

ECHO GIFTS INC

ARTICLE I NAME

THE NAME OF THE CORPORATION SHALL BE:

ECHO GIFTS INC

ARTICLE II PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS AND MAILING ADDRESS OF THIS CORPORATION SHALL BE:

800 STANLEY ST

PENSACOLA, FL 32503

ARTICLE III. SHARES

THE NUMBER OF SHARES OF STOCK THAT THIS CORPORATION IS
AUTHORIZED TO HAVE OUTSTANDING AT ANY ONE TIME IS:
ONE THOUSAND (1000) SHARES

ARTICLE IV REGISTERED AGENT AND STREET ADDRESS
THE NAME AND ADDRESS OF THE INITIAL REGISTERED AGENT IS:

MIYOUNG EDMONDS

800 STANLEY ST

PENSACOLA, FL 32503

ARTICLE V INCORPORATORS

THE NAME AND STREET ADDRESS OF THE INCORPORATORS TO THESE ARTICLES OF INCORPORATION IS:

MIYOUNG EDMONDS - PRES/SEC

800 STANLEY ST

PENSACOLA, FL 32503

THE UNDERSIGNED INCORPORATOR HAS EXECUTED THESE ARTICLES OF INCORPORATION THIS 10TH DAY OF JULY, 2001.

MIYOUNG EDMONDS

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SECRETARY OF STATE FALLAHASSEE FLORIDA

CERTIFICATE OF DESIGNATION

REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTIONS 607.0501 OR 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/AGENT, IN THE STATE OF FLORIDA.

- 1. THE NAME OF THE CORPORATION IS ECHO GIFTS INC.
- 2. THE NAME AND ADDRESS OF THE REGISTERED AGENT AND OFFICE IS

MIYOUNG EDMONDS

800 STANLEY ST

PENSACOLA, FL 32503

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 OBLIGATION OF MY POSITION AS REGISTERED AGENT.

NIXOUNG EDMONDS

DATE___

7-12-01