TRANSMITTAL LETTER

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

Enclosed is an o	original and	one(1) copy	of the articles	of incorporation a	and a check for:

□ \$70.00

□ \$78.75

Filing Fee

Filing Fee

& Certificate of Status

2 \$78.75

Filing Fee

\$87.50 Filing Fee,

& Certified Copy

Certified Copy

& Certificate of

Status

ADDITIONAL COPY REQUIRED

Daytime Telephone number

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

ARTICLES OF INCORPORATION	
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	<i>A</i> .
ARTICLE I NAME	747
The name of the corporation shall be:	
Mosquito-Magie Inc	THE PARTY OF ST. 53
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: POBOY 15486 TAUAHASS-ee, FL 32317	THASEE, MISATE
ARTICLE III PURPOSE The purpose for which the corporation is organized is:	
ARTICLE IV SHARES The number of shares of stock is:	
ARTICLE V INITIAL OFFICERS/DIRECTORS (optional) The name(s) and address(es):	
ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is:	
J.F. Weath orly JR. 2727 Capital Circle) N.Z. TALLAMASSER, FL 32317	
ARTICLE VII INCORPORATOR The name and address of the Incorporator is: J.F. Weatherly, DR POBLACISHED Tallahassee, FL32317	:
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Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Signaturé/Régistered Agent

ture/incorporater Date

8-17-01