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TRANSMITTAL LETTER

FILED

01 OCT -5 AM 11:01

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

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

SUBJECT: MULTILINER NORTH AMERICA INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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

☒ \$70.00 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: Claus Rump
Name (Printed or typed)

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*****70.00 *****70.00

P.O. Box 1002

Address

Edgewater FL 32132

City, State & Zip

386 409 7888

Daytime Telephone number

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

MULTILINER NORTH AMERICA INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

P.O. Box 1002, Edgewater, FL 32132

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Business

ARTICLE IV SHARES

The number of shares of stock is:

1000

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

Claus Rump, P.O. Box 1002, Edgewater, FL 32132, President

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

Mike Wilson, 706-I West Park Avenue, Edgewater, FL 32132

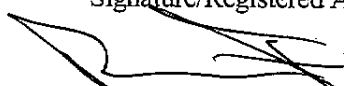
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Claus Rump, P.O. Box 1002, Edgewater, FL 32132

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

Signature/Registered Agent



Signature/Incorporator

Date

07.09.2001

Date