## TRANSMITTAL LETTER 40/00/08 702

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

P. O. Box 6327 Tallahassee, FL 323 SUBJECT:	14  CPROPOSED CORPORAT	The.	.0/31/0101043 *****78.75 *****
Enclosed is an origin	al and one(1) copy of the article	es of incorporation and a	a check for :
\$70.00	<b>□</b> \$78.75	<b>1</b> \$78.75	<b>□</b> \$87.50
Filing Fee	Filing Fee	Filing Fee	Filing Fee,
1111115100	& Certificate of Status	& Certified Copy	Certified Copy
	ce Cordinate of Blatus	& Council Copy	& Certificate of
	,		Status
		ADDITIONAL CO	
FROM: Och Name (Printed or typed)			
14901 Acaberhall St. Address			
DAVIE, FL. 3333/ City, State & Zip			
	(954)680 Daytime Te (305) 364	POSI	

10,9551,531,5550 NC

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



## FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

November 1, 2001

COUCH 14901 ARCHERHALL STREET DAVIE, FL 33331

SUBJECT: CUSTOMWEB INC. Ref. Number: W01000025254

We have received your document for CUSTOMWEB INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with an address and telephone number where you can be reached during working hours.

Bylaws are not filed with this office. Please retain them for your records.

SEE THE ENCLOSED ARTICLES OF INCORPORATION, COMPLETE AND RETURN WITH A COPY OF THIS LETTER. CALL IF YOU HAVE ANY PROBLEMS.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6972.

Doris Brown Document Specialist New Filings Section

Letter Number: 501A00059756

## 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: 145 tonces ARTICLE II \_\_\_ PRINCIPAL OFFICE The principal place of business/mailing address is: 14901 Archerhall St. JAUIE, FL. 33331 The purpose for which the corporation is organized is: To provide webderign at at took SHARES The number of shares of stock is: ARTICLE V INITIAL OFFICERS/DIRECTORS (optional) The name(s), address(es) and title(s): TRIZIA COUCH- YRESIDENY Michael Couch-ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is: INCORPORATOR The name and address of the Incorporator is: CARMEN COUCH Shall SX 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