

TRANSMITTAL LETTER

P02000000065

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

APPROVED
AND
FILED
02 JAN 29 PM 1:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SUBJECT:

Advanced Wireless Technology Inc

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

40000483405.4--7
-01/29/02--01052--001
*****88.00 *****87.50

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

☐ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate of Status

☒ \$78.75
Filing Fee
& Certified Copy

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

2 C.C.

ADDITIONAL COPY REQUIRED

FROM:

David Arrington
Name (Printed or typed)

P.O. Box 5701

Address

Nestin FL 32540

City, State & Zip

850-269-4656

Daytime Telephone number

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

02 JAN 29 PM 1:18

RECEIVED

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

[Handwritten signature]

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:

Advanced Wireless Technology Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

*P.O. Box 5701
Destin Fl. 32540*

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Retail

ARTICLE IV SHARES

The number of shares of stock is:

100,000 SHRS

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

*David Arrington / President
501 Hwy 98 East Unit G
Destin Fl. 32541*

ARTICLE VI REGISTERED AGENT

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

*David Arrington
501 Hwy 98 East Unit G
Destin Fl. 32541*

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

*David Arrington
501 Hwy 98 East Unit G.
Destin Fl. 32541*

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]

Signature/Registered Agent

1/29/02

Date

[Signature]

Signature/Incorporator

1/29/02

Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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