Po2000/6005

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

400004889644--5 -02/07/02--01021--014 *****78.75 *****78.75

SUBJECT: FORDON TRADE SOCIETY, INC.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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

- \$70.00
- \$78.75
- Filing Fee
- Filing Fee
- & Certificate of Status
- \$78.75
- \$87.50
- Filing Fee
- Filing Fee,
- & Certified Copy
- Certified Copy
- & Certificate of
- Status

ADDITIONAL COPY REQUIRED

FROM: ROBERT D. BELL (BOB-BELL)

Name (Printed or typed)

13105 IXORA CT. #214

NORTHMIAM 1, FL 33181-2320 City, State & Zip

305-895-4718

Daytime Telephone number

SECRETARY OF STATE , TALLAHIA SSEE, FLORID , 109

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

28 2/12



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

January 22, 2002

BOB BELL 13105 IXORA CT, #214 N MIAMI, FL 33181-2320

SUBJECT: FORDOM TRADE SOCIETY

Ref. Number: W02000001601

We have received your document for FORDOM TRADE SOCIETY, however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$78.75.

Your document is being returned as requested.

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

The document must state the number of shares of authorized stock.

Your corporate kit may be purchased at an office supply store.

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) 245-6919.

Beth Register
Corporate Specialist Supervisor
New Filings Section

Letter Number: 402A00002707

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	
ARTICLE I NAME The name of the corporation shall be: FOR DO M TRADE SOCIETY, INC.	
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 13/05 IX ORA CT. #2/4 NORTH MIAMI, FL 33/81-2320	
ARTICLE III PURPOSE The purpose for which the corporation is organized is: A WORLD-WIDE ORGANIZATION CREATED TO PROMOTE YOU, YOURE AND YOUR SERVICES THROUGH LOCAL CHAPTERS SET-UP, MEM BERS OF FTS,	BUSINESS, YOUR PRODUCTS IN YOUR AREA BY
ARTICLE IV SHARES The number of shares of stock is: - 100 SHARES	and the second of the second o
ARTICLE V INITIAL OFFICERS/DIRECTORS (optional) The name(s), address(es) and title(s): EXECUTIVE DIRECTOR, BOB BELL 13105 TXORA CT., #214 NORTH MAMI PRESIDENT, BOB BELL 13105 TXORA CT., #214 NORTH MAMI VICE-PRESIDENT, BOB BELL 13105 TXORA CT., #214 NORTH MI GECRETARY, BOB BELL 13105 TXORA CT., #214 NORTH MI IREASURER, BOB BELL 13105 TXORA CT., #314 NORTH MAMI IREASURER, BOB BELL 13105 TXORA CT., #314 NORTH MAMI	114M1, FL33181-232D 1, FL33181-232D 14M1, FL33181-232D 14M1, FL33181-232D 11, FL33181-232D
ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is: BOB BELL 13105 TXONA CT #214 NORTH MIA MI, F-L 33181-2320	SECRETARY TALLAHASSI 02 FEB -7
ARTICLE VII INCORPORATOR The name and address of the Incorporator is: BOBBELL 13/05-TXORA CT, #214 NORTH TVAMI, FL33/81-2320	PH 2: 09
**************************************	orporation at the place designated in this
Signature/Registered Agent	<u>F29-02</u> Date
Signature/Incorporator	1-29-02 Date

Signature/Incorporator