# PO 2000 2144

Secretary of State Divisions of Corporations P.O. Box 6327 Tallahassee, FL 32314

900004990349---6 -02/22/02--01020--008 \*\*\*\*\*78.75 \*\*\*\*\*78.75

Re: Webcapades, Inc.

#### Gentlemen:

Enclosed please find the original and one copy of the Articles of Incorporation, together with my check in the amount of \$78.75.

This represents the cost of Filing Fees, Certified Copy of Articles of Incorporation and Fee for Registered Agent Designation for the above named corporation.

Very truly yours,

Scott P. Mitchell 28050 US 19 N.

Clearwater, Fl. 33761

SI CRI TARY OF STATE UNS SI CRI TARY OF CORPORATIONS DIVISION OF CORPORATIONS

## ARTICLES OF INCORPORATION Of WEBCAPADES, INC.

The undersigned subscriber(s) to these Articles of Incorporation, natural person(s) competent to contract, hereby form a corporation under the laws of the State of Florida.

#### ARTICLE I - CORPORATE NAME

The name of the corporation is: Webcapades, Inc.

#### ARTICLE II - DURATION

This corporation shall exist perpetually unless dissolved according to Florida law.

#### ARTICLE III - PURPOSE

The corporation is organized for the purpose of engaging in business activities of under the laws of the United States and the State of Florida.

#### ARTICLE IV - CAPITAL STOCK

The corporation is authorized to issue <u>one thousand</u> shares (1,000) of <u>one</u> Dollar(s) (\$1.00) par value Common Stock, which shall be designated "Common Shares."

#### ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT

The principal office, if known, or the mailing address of the corporation is:

NAME: Webcapades, Inc.

ADDRESS: 28050 US 19 N..

CITY: Clearwater,

FLORIDA

IP: 33761

The name and street address of the Initial Registered Agent of this Corporation is:

NAME: Scott P. Mitchell ADDRESS: 28050 US 19 N.

CITY: Clearwater.

FLORIDA

ZIP: 33761

#### ARTICLE VI - INITIAL BOARD OF DIRECTORS

This corporation shall have one (1) director(s) initially. The number of directors may be either increased or diminished from time to time by the By-Laws, but shall never be less than one (1). The names and addresses of the initial director(s) of the corporation are as follows:

NAME: Scott P. Mitchell

ADDRESS: 3844 Wellington Pkwy.

CITY: Palm Harbor,

FLORIDA

ZIP: 34685

NAME:

ADDRESS:

CITY:

FLORIDA

ZIP:

#### ARTICLE VII - INCORPORATORS

The names and addresses of the incomas follows:	rporator signing these Ar	ticles of Incorporation are
NAME: Scott P. Mitchell	-	
ADDRESS: 3844 Wellington Pkwy.		
CITY: Palm Harbor,	FLORIDA	ZIP: 34685
NAME:		
ADDRESS:		***************************************
ADDRESS:	FLORIDA	ZIP:
IN WITNESS WHEREOF, the und of Incorporation this 15th day of Fe	lersigned subscriber(s) hatebruary, 2002.	
	X Sist White	(Seal)
		(Seal)
		(Seal)
State of Florida ) SS		
County of)		
before me, a Notary Public authorized to take personally appeared:  Signature	Form of Identification	•
Signature	Form of Identification	1
Signature	Form of Identification	1
known to me and known to be the person(s) acknowledged before me that the form of identification of the above na oath (was) (was not) taken.	executed these Articles of In	corporation, that I relied upon
	Witness my hand and official last aforesaid this da	I seal in the County and State ay of
	Notary Signature  Printed Notary Signature	MY COMMISSION# DD 050738  EXPIRES: August 16, 2005  Boarded The United By Blob Lindary Hars

### CERTIFICATE AND ACKNOWLEDGEMENT OF REGISTERED AGENT

CERTIFICATE OF REGISTERED AGENT OF

#### SCOTT P. MITCHELL

Pursuant to Florida Statues Sections 48.091 and 607.0501, the following is submitted: The above corporation, desiring to organize under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation at 28050 US 19 N., Clearwater, FL 33761, has named Scott P. Mitchell located at the aforesaid address, as its Registered Agent to accept service of process within this state.

#### ACKNOWLEGEMENT

Having been named as Registered Agent to accept service of process for the above stated corporation at the place designated in this certificate, and being familiar with the obligations of that position, I hereby accept to act in this capacity, and agree to comply with the provisions of Florida Law in keeping open said office.

(Registered agent)