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## TRANSMITTAL LETTER

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

iTravelPort.com Inc.

SUBJECT: \_\_\_\_\_  
(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      ☒ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                                    & Certificate of  
                                    Status

**ADDITIONAL COPY REQUIRED**

FROM: Kevin J. Frieders  
Name (Printed or typed)

7512 Dr. Phillips Blvd Suite 50 #522  
Address

Orlando, Florida 32819  
City, State & Zip

407-595-1430  
Daytime Telephone number

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

**ARTICLES OF INCORPORATION**

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

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**ARTICLE I NAME**

The name of the corporation shall be:

iTravelPort.com inc.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

7512 Dr. Phillips Blvd. Suite 50 # 522

Orlando, Fl 32819

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

To provide membership services for travellers.

**ARTICLE IV SHARES**

The number of shares of stock is:

10,000,000 - ten million shares

**ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)**

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

**ARTICLE VI REGISTERED AGENT**

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

Kevi n J. Frieders

555 Whispering Lakes Drive, Tarpon Springs, FL 34688


**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:


Kevin J. Frieders

555 Whispering Lakes Drive, Tarpon Springs, FL 34688

\*\*\*\*\*  
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

11/20/2002  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

11/20/2002  
\_\_\_\_\_  
Date