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TRANSMITTAL LETTER

Department of State
Division of Corporations

P. O. Box 6327 Tallahassee, FL 32314 HAR Systems 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 \$78.75 \$87.50 Filing Fee Filing Fee Filing Fee Filing Fee, & Certificate of Status & Certified Copy Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED Hugo Alexander Rivera FROM: Name (Printed or typed) 1919 Summer Club Dr. #307 Address Oviedo, Florida 32765 City, State & Zip (407) 971-0904

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

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	Date

Signature/Incorporator

Date

3-27-03