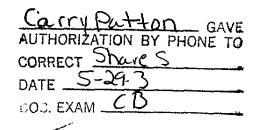
P03000058817

| (Reques | tor's Name) | | |
|-------------------------------|----------------------------|--|--|
| (Address | s) | | |
| (Address | s) | | |
| (City/Sta | ite/Zip/Phone #) | | |
| PICK-UP | WAIT MAIL | | |
| (Business Entity Name) | | | |
| (Document Number) | | | |
| Certified Copies | Certificates of Status | | |
| Special Instructions to Filir | Lord mossuse 5-29 thans | | |
| | Spollms or pame | | |
| | | | |
| <u> </u> | | | |







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O3 HAY 19 PH 2: 15
SECRETARY SERVICES FORD

TRANSMITTAL LETTER

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

| Enclosed are an orig | inal and one (1) copy of the arti | cles of incorporation and | a check for: |
|-----------------------|--|--|--|
| \$70.00 Filing Fee | □ \$78.75 Filing Fee & Certificate of Status | \$78.75 Filing Fee & Certified Copy ADDITIONAL CO | \$87.50 Filing Fee, Certified Copy & Certificate of Status |
| FROM: | • | Printed or typed) | |
| - | 0 | Avenue North Address E1Da 33772 State & Zip | <u> </u> |
| - | (727) 319-4033 Daytime T | 3 (727) 41 elephone number | 11 <u>Γ- 798/</u> |

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

| ADDICIE I MANGE | I YAM EO | 9 PH 2: 15 |
|---|-------------------|--------------------|
| The name of the corporation shall be: | SEONE | a STATE |
| Bernap Designs Inc | TALLAHA | SSEE, FLORIDA |
| ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: | • * | , . |
| (-, 1) / 105GO 68th Ave N | | |
| (Internet) / 10500 68th Ave N Seminale, H 38772 | | • |
| ARTICLE III PURPOSE | | |
| The purpose for which the corporation is organized is: | - | |
| WEB DESIGN | | |
| ARTICLE IV SHARES | | |
| The number of shares of stock is: | , | |
| one | | |
| ARTICLE V INITIAL OFFICERS/DIRECTORS (optional) | | |
| The name(s), address(es) and title(s): | | |
| CARRY PATTON - CLOWER | | |
| 10540 68th Aven | | |
| Seminole, F/ 33772 | | |
| ARTICLE VI REGISTERED AGENT | | |
| The <u>name and Florida street address</u> of the registered agent is: | | |
| CAREY PATTON | | |
| 10540 USTA Ave N | | |
| Seminale, H 33772- ARTICLE VII INCORPORATOR | | |
| The name and address of the Incorporator is: | · | |
| CARRY PATTON 10540 WHAT AVE N | | |
| | | |
| Seminile, Fl 33712 | ***** | ****** |
| Having been named as registered agent to accept service of process for the above stated certificate, I am familiar with and accept the appointment as registered agent and agree to | | designated in this |
| , | ner m ms capacity | |
| Cary fatter | may 17, | 2003 |
| Signature/Registered Agent | / Date | • |
| Carrie Otto | ma. 17 | ን <u>ለ</u> ል 2 |
| Signature/Incorporator | // Date | +003- |
| Gigiaturo meorporator | 0 540 | |

FILED

ARTICLES OF INCORPORATION

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