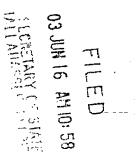
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(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			



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# TRANSMITTAL LETTER

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

SUBJECT: Fra	meScale, Inc.			
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)	
Enclosed are an orig	rinal and one (1) copy of the art	icles of incorporation and	d a check for:	
\$70.00	<b>☑</b> \$78.75	□ \$78.75	□ \$87.50	
Filing Fee	Filing Fee & Certificate of Status	Filing Fee & Certified Copy	Filing Fee, Certified Copy & Certificate of Status	
		ADDITIONAL CO	= : = : = :	
FROM:	Jason Honingford			
	Name (Printed or typed)			
	20398 Lorenzo Ave			
•		Address	<u> </u>	
	Port Charlotte, FL 33952-3849			
•	City	, State & Zip		
	239-699-3486			
•	Daytime Telephone number			

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

. .

Surge Landing Commence

. . . . .

### ARTICLES OF INCORPORATION

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

### ARTICLE I NAME

· The name of the corporation shall be:

FrameScale, Inc.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

20398 Lorenzo Ave Port Charlotte, FL 33952-3849

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To engage in any activity or business permitted under the laws of the United States and of the State of Florida

## ARTICLE IV SHARES

The number of shares of stock is: 500

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

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

Anthony Verhoeven, President/Treasurer

20398 Lorenzo Ave Port Charlotte, FL 33952-3849 Jason Honingford, Vice President/Secretary

20398 Lorenzo Ave

Port Charlotte, FL 33952-3849

### ARTICLE VI REGISTERED AGENT

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

Jason Honingford 20398 Lorenzo Ave Port Charlotte, FL 33952-3849

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Jason Honingford 20398 Lorenzo Ave

Port Charlotte, FL 33952-3849

**********************	***********
Having been named as registered agent to accept service of process for the above st certificate, I am familiar with and accept the appointment as registered agent and ag	
Our Hinder	6/11/2003
Signature/Registered Agent	Date
(m) Aidy	6/11/2003
Signature/Incorporator	Date

