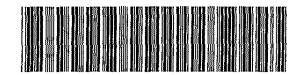
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## TRANSMITTAL LETTER

Department of State

Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314 Subject encipher corp. Enclosed is an original and two (2) copies of the articles of incorporation and a check for **⋈** \$78.75 \$78.75 \$87.50 \$70.00 Filing Fee Filing Fee Filing Fee, Filing Fee Certified Copy & Certified Copy & Certified Copy & Certificate (ADDITIONAL COPY REQUIRED)

FROM: Nellie Akalp
Name

30141 Agoura Rd., Suite 205
Address

Agoura Hills, California 91301
City, State & Zip

818-879-9079

Daytime Telephone number

NOTE: Please provide the original and one copy of the articles. Provide TWO copies if you have requested a certified copy as designated in the boxes above.

## ARTICLES OF INCORPORATION OF encipher corp.

The undersigned incorporator, for the purpose of forming a corporation under the Florida business Corporation Act, hereby adopts the following articles of incorporation.

ARTICLE I The name of the Corporation shall be: encipher corp. *PRINCIPAL OFFICE* The principal place of business and mailing address of this corporation shall be: 29032 Rivergate Run Wesley Chapel, Florida 33543 The number of shares that this corporation is authorized to have outstanding at any one time is: 1500 at \$0.01 par value per share. INITIAL DIRECTORS *ARTICLE IV* The name(s) and address(s) of the initial Director(s) is/are: Gregory Vonderheide 29032 Rivergate Run Wesley Chapel, Florida 33543 <u>INITIAL REGISTERED AGENT AND STREET ADDRESS</u> The name and Florida street address of the initial registered agent is: Gregory Vonderheide 29032 Rivergate Run Wesley Chapel, Florida 33543 INCORPORATOR The name and address of the incorporator to these Articles of Incorporation is: Nellie Akalp 30141 Agoura Rd., Suite 205 Agoura Hills, California 91301 Nellie Akalp, Incorporator Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificatcN hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and Isam familiar with and accept the obligations of my position as registered agent.

Registered Agent

Date