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DIVISION OF CORFERATION

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TRANSMITTAL LETTER

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

SUBJECT:	(PROPOSED CORPORATE	NAME - MUSTINCLUD	E SUFFIX)
Enclosed is an origi	nal and one(1) copy of the artic	les of incorporation and	a check for :
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy ADDITIONAL CO	Filing Fee, Certified Copy & Certificate of Status PY REQUIRED
	_michelle	FROM: Printed or typed)	······
	_2182 Jeff	erson Rd. Address	O4 SE TAL
	Tallarassee, fl. 32317		
	850 - 321- Daytime T	-9689	PH 4:1

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit) ARTICLE I The name of the corporation shall be: Virtual Marketing, Inc. ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 2182 Jefferson Rd Tallahassee, fl. 3231 ARTICLE III **PURPOSE** The purpose for which the corporation is organized is: any and all lawful business in the State of Florida ARTICLE IV SHARES The number of shares of stock is: INITIAL OFFICERS/DIRECTORS (optional) The name(s), address(es) and title(s): Michelle Masoa Tallahassee, A. 3237 ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is: Michelle McDad 2182 Tefferson Da ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Michelle McDa 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

ARTICLES OF INCORPORATION

Signature/Incorporator