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TRANSMITTAL LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 Enclosed are an original and one (1) copy of the articles of incorporation and a check for: \$70.00 \$78.75 \$87.50 Filing Fee & Certified Copy Filing Fee Filing Fee, & Certificate of Status Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED Christopha Ryan
Namel(Printed or typed) 8701 Phillips Huy Suite 103

Sacksonville Fl. 32256

City, State & Zip

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

904-367-823 Daytime Telephone number

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: SuperCoups of Jackson vilk, Inc.	04 JAN 12 PM 4: 36 SECRETARY OF STATE TALL AHASSEE FLORIDA
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 8701 Phillips Highway Suite 103 Sacksonville, Fl. 32256	
ARTICLE III PURPOSE The purpose for which the corporation is organized is: Advartising Agency	
ARTICLE IV SHARES The number of shares of stock is: \OO	- , ,
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): Richard & Redick President & Treasurer C 3233 Fiddlerk Hammock Lane Ponte vedre Beach, F1. 32082	Hris Ryon Vice fresidentico Boyard Ct. Scotoffy t. Mary's, GA 31558
ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is: Chris Ruan 8701 phillips Huy Suite 103 Sacksonville, Pl. 32256	
ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Chris Ruen 300 Beyard Ct. St. Merys GA 31558	
**************************************	tted corporation at the place designated in this
Signature/Registered Agent Change Signature/Incorporator	01-01-04 Date