

PO40000016937

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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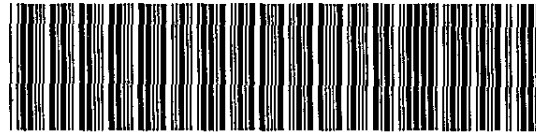
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1/29/04
New Profit
sf

TRANSMITTAL LETTER

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

SUBJECT: Sacred Eye INC.
 (Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00
 Filing Fee

☐ \$78.75
 Filing Fee
 & Certificate

☐ \$78.75
 Filing Fee
 & Certified Copy

☒ \$87.50
 Filing Fee,
 Certified Copy
 & Certificate

ADDITIONAL COPY REQUIRED

FROM: Tyrent Davis, Rodney Mason, Brian Owens
 Name (Printed or typed)

P.O. Box 677974
 Address

Orlando, Fla. 32867-7974
 City, State & Zip

407.671.6735
 Daytime Telephone number

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

ARTICLES OF INCORPORATION

1. The name of the corporation shall be: Sacred Eye INC.
2. The principal place of business and mailing address of the corporation is: P.O. Box 677974 Orlando, Fla. 32867-7974.
3. The corporation shall have the authority to issue 1,000,000 shares of stock.
4. The registered agent of the corporation is Tyrant Davis and the registered street address is 198 Masters Blvd, Winter Park, FL 32792 Florida _____.
5. The initial Board of Directors shall have 3 member(s) whose name(s) and address(es) is/are as follows: Tyrant Davis, Brian Owens, Rodney
Macon

The number of directors may be raised or lowered by amendment of the bylaws of the corporation but shall in no case be less than one.

6. The incorporator of this corporation is Tyrant Davis, Brian Owens, Rodney Macon whose street address is P.O. Box 677974 Orlando, Fla 32867-7974

Dated 1/14/04

T. Davis, B. Owens, R. Macon
Incorporator

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I 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 am familiar with and accept the obligations of my position as registered agent.

Dated 1/14/04

Tyrant Davis
Registered Agent