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TRANSMITTAL LETTER

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

SUBJECT:	BUYERSP	ICK, INC			
-	(PRÓPOSED CORPORA)	TE NAME <u>– MUST INCL</u>	JDE SUFFIX)		
Enclosed are an original and one (1) copy of the articles of incorporation and a check for:					
□ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	S87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED		
FROM:	PETE R. Name (SIER RA	!		
P.O. BOX 272294 Address					
	TAMPA City, S	FL 33@ State & Zip	<u>88</u> _		
813-924-0836 Daytime Telephone number					

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

ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	FILED
ARTICLE I NAME The name of the corporation shall be:	04 FEB 16 PM 3: 09
BUYERSPICK, INC.	SLUKETARY OF STATE TALLAHASSEE, FLORIDA
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: P.O. BOX 276	2294
TAMPA, FL. 3	
ARTICLE III PURPOSE The purpose for which the corporation is organized is: ADVECTISING	
ARTICLE IV SHARES The number of shares of stock is: /0,000	
ARTICLE V INITIAL OFFICERS/DIRECTORS (optional) The name(s), address(es) and title(s):	
PETE R. SIERRA, PRESIDEM	
PETE R. SIERRA, SECRETA	RY
ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is: PETE R. SIERRA 8342 N. ARMENIA AV.	
TAMPA, FL. 33604	
ARTICLE VII INCORPORATOR The name and address of the Incorporator is:	-
PETE R. SIERRA P.O. BOX 272294	
**************************************	***********
Having been named as registered agent to accept service of process for the above stated corpor certificate, I am familiar with and accept the appointment as registered agent and agree to act in	
Oct & Sauce	2-11-04
Signature/Registered Agent	Date

Signature/Incorporator