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Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850) 205-0381

From:

Account Name : A 1 A CORPORATE SERVICES, INC.  
Account Number : I20010000247  
Phone : (305) 674-3313  
Fax Number : (305) 675-2811

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS

**FLORIDA PROFIT CORPORATION OR P.A.**

**TUO FREENDS, INC.**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$70.00

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7/28/31/04

## 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:

TUO FREENDS, INC.

### ARTICLE II: PRINCIPAL OFFICE

The principal place of business address is:

5712 FINCH AVE.

JACKSONVILLE, Florida 32219

The principal mailing address is:

PO BOX 62115

JACKSONVILLE, FL 32208

### ARTICLE III: PURPOSE

The purpose for which the corporation is organized:

The corporation may engage in any activity or business permitted under the laws of the State of Florida.

### ARTICLE IV: SHARES

The number of shares of stock is:

4 COMMON SHARES

### ARTICLE V: INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es), and title(s) of the directors and officers is/are:

Director & President:

ANGELINE B. O'BRYANT

5712 FINCH AVE

JACKSONVILLE, FL 32219

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PAGE 2 TUO FREENDS, INC.

ARTICLE VI: REGISTERED AGENT

The name and Florida street address of the registered agent is:

ANGELINE B. O'BRYANT

5712 FINCH AVE

JACKSONVILLE, FL 32219

ARTICLE VII: INCORPORATOR

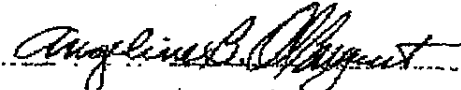
The name and Florida street address of the incorporator is:

ANGELINE B. O'BRYANT

5712 FINCH AVE

JACKSONVILLE, FL 32219

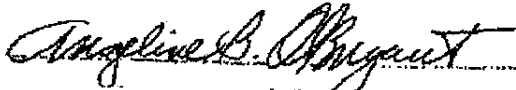
*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.*



ANGELINE B. O'BRYANT / Registered Agent

3/30/04

Date



ANGELINE B. O'BRYANT / Incorporator

3/30/04

Date

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