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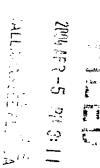
(Re	equestor's Name)			
(Ad	ldress)			
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(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
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TRANSMITTAL LETTER

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2004 APR -5 PM 3: 11

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

SUBJECT: BI	oward B2B, Inc.			
	(Proposed corporate name - mus	st include suffix)	_	
Enclosed is an original o	nd one(1) copy of the articles of	incornoration and a che	ook for	
Eliciosco is all original a	nd one(1) copy of the articles of	meorporation and a ene	OR IOI.	
\$70.00	\$78.75	X \$78.75	\$87.50	
Filing Fee	Filing Fee	Filing Fee	Filing Fee,	
-	& Certificate	& Certified Copy	Certified Copy & Certificate	
		ADDITIONAL C	OPY REQUIRED	
FROM:	Robert L. Gresham			
Name (printed or typed)				
9100 W. Atlantic Blvd #612 Address				
Coral Springs, FL 33071 City, State & Zip				
	754 499 7486	•		

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

Daytime Telephone number

ARTICLES OF INCORPORTION

The undersigned incorporator, for the purpose of forming a corporation under the Floridage Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE II – PRICIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

9100 W. Atlantic Blvd #612 Coral Springs, FL 33071

ARTICLE III - SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 10000

<u> ARTICLE IV – INITIAL REGISTERED AGENT AND STREET ADDRESS</u>

The name and Florida street address of the initial registered agent are:

Robert L. Gresham 9109 W. Atlantic Blvd #612 Coral Springs, FL 33071

ARTICLE V - INCORPORATOR

The name and address of the Incorporator to these Articles of Incorporation are:

Robert L. Gresham 9100 W. Atlantic Blvd #612 Coral Springs, FL 33071

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 I am familiar with and accept the obligations of my position as registered agent.