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TRANSMITTAL LETTER

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

SUBJECT: TEL-COMMwireless RESOURCES, INC.

(PROPOSED CORPORATE NAME - MUST INCLUDE 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

☒ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: JOSEPH SAPORTAS

Name (Printed or typed)

9411 DISCOVERY TERRACE #201

Address

BRADENTON FLORIDA 34212

City, State & Zip

941.741-9577

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)

ARTICLE I NAME

The name of the corporation shall be:

TEL-COMMwireless RESOURCES, INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

9411 DISCOVERY TERRACE #201
BRADENTON, FLORIDA 34212

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO PROVIDE WIRELESS COMMUNICATIONS CONSULTING, WIRELESS NETWORK DESIGN, WIRELESS IP AND
INSTALLATION SERVICES

ARTICLE IV SHARES

The number of shares of stock is:

1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

JOSEPH SAPORTAS, PRESIDENT
NORMAN LOFQUIST, VICE PRESIDENT
MARGARET KAUFMAN, SECRETARY AND TREASURER

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

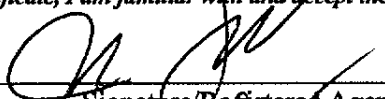
JOSEPH SAPORTAS
9411 DISCOVERY TERRACE #201
bRADENTON, FLORIDA 34212

ARTICLE VII INCORPORATOR

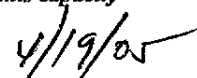
The name and address of the Incorporator is:

JOSEPH SAPORTAS
JOSEPH SAPORTAS
9411 DISCOVERY TERRACE #201
BRADENTON, FLORIDA 34212

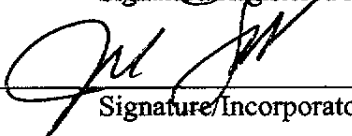
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



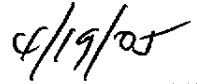
Signature/Registered Agent



Date



Signature/Incorporator



Date

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NOTARIES PUBLIC STATE
OF FLORIDA