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# TRANSMITTAL LETTER

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

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:    X \$70.00
Filing Fee Filing Fee Filing Fee,
& Certificate of Status  ADDITIONAL COPY REQUIRED
FROM: JOSE E. TAVAREZ  Name (Printed or typed)
1070 SW 46TH AVE APT. 105 Address
POMPANO BEACH, FL. 33069  City, State & Zip
954-609-6793  Daytime Telephone number

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

EXTINCTION LEVEL, INC.

# 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:

05 MAY II AM 10: 03
TALLAHASSEE, FLORIDA

EXTINCTION LEVEL, INC.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

1070 SW 46TH AVE, Suite 105 POMPANO BEACH, FL 33069 ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

WEB DESIGNER

#### 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):

JOSE E. TAVAREZ, DIRECTOR 1070 SW 46TH AVE, APT. 105 POMPANO BEACH, FL. 33069

#### ARTICLE VI REGISTERED AGENT

The <u>name and Florida street address</u> (P.O. Box <u>NOT</u> acceptable) of the registered agent is: JOSE E. TAVAREZ 1070 SW 46TH AVE, APT. 105

POMPANO BEACH, FL. 33069

#### ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is: JOSE E. TAVAREZ

1070 SW 46TH AVE, APT. 105 POMPANO BEACH, FL. 33069

Having been named as registered agent to accept service of process for the above stated corporation at the place designated

ertificate, Lam familiar with and accept t	he appointmen	t as registered agent and agree to act in this cap
		5-6-05
Signature/Registered Agent		Date
LATO		5-6-05
Signature/Incorporator	12.00	Date

ATX1