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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

05 JUN 20 PM 2:35

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6/20/05
BWK

TRANSMITTAL LETTER

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

SUBJECT: Imangs, 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: Christopher Louis Davis

Name (Printed or typed)

6113 Town Colony Drive Apt 817

Address

Boca Raton, FL 33433

City, State & Zip

561-302-0249

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:

Imangs, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

6113 Town Colony Drive Apt 817
Boca Raton, FL 33433

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Hardware/Software Development

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Christopher Louis Davis President
6113 Town Colony Drive Apt 817
Boca Raton, FL 33433

ARTICLE VI REGISTERED AGENT

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

Julius Staniewicz
3048 NW 27th Terrace
Boca Raton, FL 33434

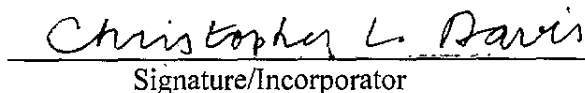
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Christopher L. Davis
6113 Town Colony Drive Apt 817
Boca Raton, FL 33433

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

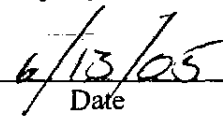

Signature/Registered Agent

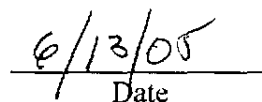

Signature/Incorporator

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA


Date


Date