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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

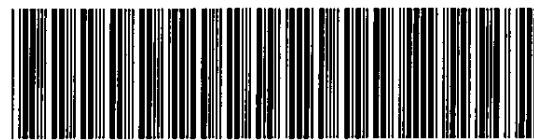
PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

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COVER LETTER

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

SUBJECT: Eagle Eye Management Services, 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: Travis C. Tompkins
Name (Printed or typed)

710 Alcala Avenue
Address

Lehigh Acres, Florida 33936
City, State & Zip

239-895-6183

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:

EagleEye Management Services, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

710 Alcala Avenue
Lehigh Acres, Florida 33936

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Management Services

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):

Travis C. Tompkins, President
710 Alcala Avenue
Lehigh Acres, Florida 33936

ARTICLE VI REGISTERED AGENT

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

Travis C. Tompkins
710 Alcala Avenue
Lehigh Acres, Florida 33936

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Travis C. Tompkins
710 Alcala Avenue
Lehigh Acres, Florida 33936

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

Travis C. Tompkins
Signature/Registered Agent

6/9/06
Date

Travis C. Tompkins
Signature/Incorporator

6/9/06
Date

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TALLAHASSEE, FLORIDA