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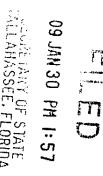
(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				





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COVER LETTER

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

SUBJECT: ADB Or	nline Enterprises, Inc.		
	(PROPOSED CORPORA		
\$70.00 Filing Fee	2 \$78.75	S78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status
FROM:	Athea D Blake Name (Printed or typed) 7568 Pine Fork Drive Address		
	Orlando, FL 32822 City, State & Zip		
	407 927 0785 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:

ADB Online Enterprises, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

7568 Pine Fork Drive Orlando, FL 32822

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The purpose of the corporation is to conduct any lawful purpose or purposes.

ARTICLE IV SHARES

The number of shares of stock is: 100 Common

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Athea D Blake, President 7568 Pine Fork Drive Orlando, FL 32822

09 JAN 30 PM 1:57

ARTICLE VI REGISTERED AGENT

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

Corporation Service Company 1201 Hays Street Tallahassee, FL32301

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

Athea D Blake 7568 Pine Fork Drive Orlando, FL 32822

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

Date

Date