

FEB. 2009
Division of Corporations

CAPITAL CONNECTION

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Florida Department of State
Division of Corporations
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To:

Division of Corporations
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Account Name : YOUR CAPITAL CONNECTION, INC.
Account Number : I200000000257
Phone : (850) 224-8870
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FLORIDA PROFIT/NON PROFIT CORPORATION

Cyber-Rides, Inc.

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TALLAHASSEE, FLORIDA

**ARTICLES OF INCORPORATION
OF
Cyber-Rides, Inc.**

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2009 FEB 25 PM 1:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I: NAME

The name of the corporation is **Cyber-Rides, Inc.**

ARTICLE II: PRINCIPAL OFFICE

The principal place of business and mailing address of the corporation is **13234 Heather Ridge Loop, Fort Myers, FL 33966.**

ARTICLE III: CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is one thousand (1,000) shares having a par value of (\$1.00) per share.

ARTICLE IV: INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is **Michael F. Kayusa, 2400 First Street, Suite 303, Fort Myers, FL 33901.**

ARTICLE V: INCORPORATOR

The name and address of the incorporator of these Articles of Incorporation is **Your Capital Connection, Inc., 417 E. Virginia St., Suite 1, Tallahassee, FL 32301.**

ARTICLE VI: OFFICERS & DIRECTORS

The name and address of the initial Officers and Directors of the corporation are:

Scott Albert, Dir/ VP, 13234 Heather Ridge Loop, Fort Myers, FL 33966

Dave Ganger, Dir/Pres/Sec, 13234 Heather Ridge Loop, Fort Myers, FL 33966

The undersigned has executed these Articles of Incorporation this 25th day of February 2009.

"Your Capital Connection, Inc. by, Christina L. Fields, Client Representative"

Christina L. Fields

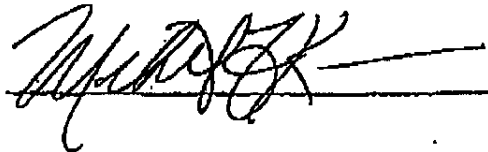
**CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of section 608.415, Florida Statutes, the mentioned company, organized under the laws of the State of Florida, submits the following statement in designating the registered agent/registered office, in the State of Florida.

1. The name of the company is: Cyber-Rides, Inc.

2. The name and address of the registered agent and office is: Michael F. Kayusa
2400 First Street, Suite 303
Fort Myers, FL 33901

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED COMPANY AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.



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