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COVER LETTER

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

SUBJECT: OmniComm USA, 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:

RON LINARES

Name (Printed or typed)

2101 W. COMMERCIAL BLVD., SUITE 4000

Address

FORT LAUDERDALE, FL 33309

City, State & Zip

954-473-1254

Daytime Telephone number

RTLCF0@omnicomm.com

E-mail address: (to be used for future annual report notification)

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

Omnicomm USA
Corporation fee
Tax

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:

OMNICO MM USA, INC.

ARTICLE II PRINCIPAL OFFICE

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

2101 WEST COMMERCIAL BLVD, Suite 4000
FORT LAUDERDALE, FL 33309

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

SALE OF SOFTWARE + SERVICES

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):

- CORNELIS F. Wit, CEO } 2101 W. COMMERCIAL BLVD, Suite 4000
- RANDALL B. SMITH, CTO } FORT LAUDERDALE, FL 33309
- RONALD T. LINARES, CFO }

ARTICLE VI REGISTERED AGENT

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

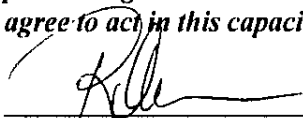
- RONALD T. LINARES
2101 WEST COMMERCIAL BLVD, Suite 4000
FORT LAUDERDALE, FL 33309

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

- RONALD T. LINARES; SAME AS ABOVE
2101 West Commercial Blvd, Suite 4000
Fort Lauderdale, FL 33309

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

10/28/09

Date

10/28/09

Date

09 NOV -9 PM 1:04

FILED