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1-19-10

## **COVER LETTER**

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

SUBJECT:	Smart Contro	Technolog	
<del></del>	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	VDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the artic	cles of incorporation and	l 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 CO	PY REQUIRED
FROM:		(Printed or typed)	<u>.                                    </u>
<del></del>	807 S. F	nemont AU	
	~	Address  State & Zip	
	•	0-5679	
	_	elephone number	<del></del>
		10°C 901. com	
<del></del>	E-mail address: (to be used	d for future annual report	notification)

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:	
Smart Control Technolog	ies Inc.
ARTICLE II PRINCIPAL OFFICE	₹% <b>5</b>
The principal street address and mailing address, if different is:	
807 S. FREMONT AUE	
TAMPA, FL 33606	
ARTICLE III PURPOSE	
The purpose for which the corporation is organized is:	
commercialization of technology for prof.	JAN 14 PH 12: 45 CALLASSEE, FLORIDA
ARTICLE IV SHARES The number of shares of stock is:	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s):	Ponnie Leighty 7035 19TH Way North SAINT PETERS BURG, TC 33702
CEO Brott Ouran Brott Ouran Brott Street address (P.O. Box NOT acceptable) of the page and Florida street address (P.O. Box NOT acceptable) of the page and Florida street address (P.O. Box NOT acceptable) of the page and Florida street address (P.O. Box NOT acceptable) of the page and Florida street address (P.O. Box NOT acceptable) of the page and Florida street address (P.O. Box NOT acceptable) of the page and Florida street address (P.O. Box NOT acceptable) of the page and Florida street address (P.O. Box NOT acceptable) of the page and Florida street address (P.O. Box NOT acceptable) of the page and Florida street address (P.O. Box NOT acceptable) of the page and Florida street address (P.O. Box NOT acceptable) of the page and Florida street address (P.O. Box NOT acceptable) of the page and Florida street address (P.O. Box NOT acceptable) of the page and Florida street address (P.O. Box NOT acceptable) of the page and Florida street address (P.O. Box NOT acceptable) of the page and Florida street address (P.O. Box NOT acceptable) and the page and Florida street address (P.O. Box NOT acceptable) and the page and Florida street address (P.O. Box NOT acceptable) and the page and Florida street address (P.O. Box NOT acceptable) and the page and Florida street address (P.O. Box NOT acceptable) and the page and Florida street address (P.O. Box NOT acceptable) and the page and Florida street address (P.O. Box NOT acceptable) and the page and Florida street address (P.O. Box NOT acceptable) and the page and Florida street address (P.O. Box NOT acceptable) and the page and Florida street address (P.O. Box NOT acceptable) and the page and Florida street address (P.O. Box NOT acceptable) and the page and Florida street address (P.O. Box NOT acceptable) and the page and Florida street address (P.O. Box NOT acceptable) and the page and the p	Forme Leighty
Broth Duran	1055 19 IN WAY THOUTH
Tayorthanh	SAINT PETERS BURG, TC
ARTICLE VI RÉGISTERED AGENT	
The <u>name and Florida street address</u> (P.O. Box NOT acceptable) of t	he registered agent is:
Scott Duran	
807 S. FREMONT AVE	
TAMPA, FL 33646	
ARTICLE VII INCORPORATOR	
The <u>name and address</u> of the Incorporator is:	
Scott Duran	
8075. FREMONT AUE	
**************************************	**********
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