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SECRETAIN OF STATE TALLAHASSEE, FLORIDA

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COVER LETTER

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

SUBJECT: Worldwide Market So	olutions, Inc.
(PROPOSED CORPORA	TE NAME – <u>MUST INCLUDE SUFFIX</u>)
Enclosed are an original and one (1) copy of the arti	cles of incorporation and a check for:
\$70.00 Filing Fee & Certificate of Status	\$78.75 \$87.50 Filing Fee & Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED
FROM: Lyle D. Fugleberg Name	(Printed or typed)
108 Raintree Drive	Address
Longwood, Florida 32	779 State & Zip
407-696-7744 Daytime To	elephone number
dfugleberg@hotmail.co	om I 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 The name of the	worldwide Market Sol	utions, Inc.		
ARTICLE II	PRINCIPAL OFFICE Principal street address 108 Raintree Drive	Mailing add	Mailing address, if different is:	
	Longwood, Florida 32779			
ARTICLE III The purpose for Internet adv	which the corporation is organized is:			
ARTICLE IV				
	nares of stock is: 100 INITIAL OFFICERS AND/OR DIRECTO	nDQ		
	Title:Lyle D, Fugleberg, President			
Address:	108 Raintree Drive	Address:	⊼o ≅	
Longwood, Florida :	Longwood, Florida 32779			
	Title:			
Address:		Address:		
			B // F	
			BA F	
Name and	Title:	Name and Title:	AIE	
Address:		Address:		
				
ARTICLE VI	REGISTERED AGENT			
	lorida street address (P.O. Box NOT acceptable)	of the registered agent is:		
Name:	Lyle D. Fugleberg			
Address:	108 Raintree Drive			
	Longwood, Florida 32779			
ARTICLE VII	INCORPORATOR			
	ddress of the Incorporator is:			
Name:	Lyle D. Fugleberg			
Address:	108 Raintree Drive Longwood, Florida 32779	_		
Having been nan	med as registered agent to accept service of proce am familiar with and accept the appointment as re Required Signature/Registered Agent	ess for the above stated corporagistered agent and agree to act	ation at the place designated in in this capacity	
	required Signature/Registered Agent		/ Date	
I submit this doc document to the l	cument and affirm that the facts stated herein ar Department of State constitutes a third degree felo	e true. I am aware that the fa ny as provided for in s.817.155,	ulse information submitted in a , F.S.	
	/\ <i>\</i> \\\\\		10/4/10	
	Requirea Signature/Incorporator		Date	