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(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

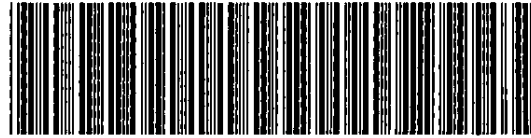
(Business Entity Name)

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2/18/14

COVER LETTER

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

SUBJECT: MICROFRAC, 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: DAVID MALLARD
Name (Printed or typed)

7900 N.W. 74TH TERRACE
Address

TAMARAC, FL 33321
City, State & Zip

954-915-4143 - 530-350-7221
Daytime Telephone number

SLOROLLEY1@JUND.COM
E-mail address: (to be used for future annual report notification)

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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)

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ARTICLE I NAME

The name of the corporation shall be: MICROFRAC, INC.

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ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

7900 N.W. 74TH TERRACE
TAMARAC, FL 33321

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: TO ENGAGE IN ANY LAWFUL OR
ACTIVITY FOR WHICH CORPORATIONS MAY BE ORGANIZED UNDER
THE LAWS OF THE "STATE OF FLORIDA"

ARTICLE IV SHARES

The number of shares of stock is: 10,000,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	<u>DAVID MALLARD, CEO/PRES.</u>	Name and Title:	<u>JAMES LOGAN/CFO</u>
Address	<u>7900 N.W. 74TH TERRACE</u> <u>TAMARAC, FL 33321</u>	Address:	<u>7900 N.W. 74TH TERRACE</u> <u>TAMARAC, FL 33321</u>

Name and Title:	<u>JAMES VARNEY, V.P.</u>	Name and Title:	_____
Address	<u>1712 NE 158TH CIRCLE</u> <u>WA 98686 (Vancouver)</u>	Address:	_____

Name and Title:	<u>LINDA WRIGHT, SECRETARY</u>	Name and Title:	_____
Address	<u>7900 N.W. 74TH TERRACE</u> <u>TAMARAC, FL 33321</u>	Address:	_____

(conti.)

Name and Title: _____ Name and Title: _____
 Address _____ Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: DAVID MALLARD
 Address: 7900 N.W. 7TH TERRACE
TAMARAC, FL 33321

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: DAVID MALLARD
 Address: 7900 N.W. 7TH TERRACE
TAMARAC, FL 33321

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

David Mallard _____ 2/11/14
 Required Signature/Registered Agent Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

David Mallard _____ 2/11/14
 Required Signature/Incorporator Date

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