Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (859)617-6381

From:

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## FLORIDA PROFIT/NON PROFIT CORPORATION ADVIBE MARKETING CORP

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## ARTICLES OF INCORPORATION

In compliance with Chapter 60+ (Profit)

ARTICLE 1 NAME: The name of the corporation is: ARTICLE II PRINCIPAL OFFICE: The principal street address and mailing address is: 2520 SW 92 PL ARTICLE III SHARES: The number of shares of stock is: INITIAL DIRECTORS AND/OR OFFICERS: ARTICLE IV ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS The name and Florida street address (PO Box not acceptable) of the registered agent is: INCORPORATOR: The name and address of the Incorporator is:

## Required Signatures:

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

Rosistand 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.

Totorporator Date

EIN: 39-4771405