19600053389 (SAMPLE LETTER OF TRANSMITTAL)

Date

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

Gentlemen:

800001861508 -06/13/96--01052--012 ****122.50 ****122.50

| Re: | SKYENET | Communications Inc. |
|-----|---------------------|---------------------|
| | Skye Net empthor | f corporation) |

Enclosed please find the original and one copy of the Articles of Incorporation, together with my check in the amount of \$122.50.

This represents the cost of the Filing Fees, Certified Copy of Articles of Incorporation and Fee for Registered Agent Designation for the above named corporation.

Very truly yours,

Scoutto Miles

(individual's name)

Ship Not Communication

789,505,691,671 N96-12767

| MAILING ADDRESS OF CORPO | PRATION |
|--------------------------|---------|
| 230 mississipp | n' aug |
| Al Clard, 21, 34 | |
| 21 Jana, 9 4 07 | 767 |
| PHONE | |
| (401) \$92-4080 | |
| Area Code Number | Ext. |



Juno 14, 1996

LEONETTE MILES 230 MISSISSIPPI AVENUE ST. CLOUD, FL 34769

SUBJECT: SKYENET COMMUNICATIONS

Ref. Number: W96000012767

We have received your document for SKYENET COMMUNICATIONS and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

The document must state the number of shares of authorized stock.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6972.

Doris Brown Document Specialist

Letter Number: 396A00029740

ARTICLES OF INCORPORATION

| Skya Not again | of the street | |
|--|---------------------------------------|--|
| Change Control Court Cou | ONY (TYTE ON TIONS) IN | |
| The undersigned subscriber(s) to these Articles of Inc corporation under the laws of the State of Florida | corporation, natural person(s) compet | ent to contract, hereby form a |
| ARTICLE 1 | - CORPORATE NAME | 1 6 G |
| The name of the corporation is: Skyr Net Com | munications, inc | |
| • | LE II - DURATION | 10 -10 |
| This corporation shall exist perpetually unless disso | | |
| ARTICI | LE III • PURPOSE | 0 |
| . The corporation is organized for the purpose of enga United States and the State of Florida. | | mitted under the laws of the |
| ARTICLE I | IV - CAPITAL STOCK | |
| The corporation is authorized to issue | shares (500) o | [|
| Dollar(s) (\$) par value Com | mon Stock, which shall be designat | ed "Common Shares." |
| ARTICLE V - INITIAL R | EGISTERED OFFICE AND AGEN | V T |
| The street address of the Initial Registered Agent offi | ice and the name of the Initial Regis | tered Agent at that office is: |
| NAME (EONE-FE MILES | · · · · · · · · · · · · · · · · · · · | |
| ADDRESS 230 MISSISSIPPI | | |
| cory St. agud | PLORIDA P | ZIP 34749 |
| The principal office, if known, or the mailing adress | | |
| NAME France BO abone | | , , , , , , , , , , , , , , , , , , , |
| ADDRESS | | |
| СПУ | FLORIDA | Zip |
| ARTICLE VI - INITI | IAL BOARD OF DIRECTORS | |
| This corporation shall have | directors initially. The number | er of directors may be either one (1). The names and |
| NAME LEONETHE MILES | | |
| ADDRESS 230 MISSISSIPPI | ave | |
| ary St. Cloud | STATE [| 211 34769 |
| NAME | | |
| ADDRESS | | |
| СПУ | STATE | ZIP |
| NAME | | |
| ADDRESS | | |
| спу | STATE | Zir |
| FORM 215: ARTICLES OF INCORPORATION, PAGE 1 | PAGE 1 | SEMINOLE-MIAMI 012593 |

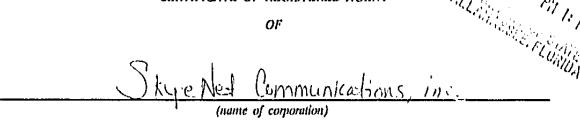
ARTICLE VII - INCORPORATORS

The names and addresses of the incorporators signing these Articles of Incorporation are as follows:

| NAMIL LEONE- | HE MILES | | |
|-----------------------|--------------------------------|---|-----------------------|
| ADDRESS (ジ3) | mississippic | દેઇ-૯ | |
| CITY 51.0 | loud | SINTE /-/ | za 39769 |
| NAMB | | | |
| ADDRESS | | · . · · · · · · · · · · · · · · · · · · | |
| CTIY | | STATE | Zir |
| NAME | | ······ | |
| ADDRESS | · | | |
| стгү ./ | | SIATE | ZIP |
| IN WITNESS WHEREOF, (| he undersigned subscriber(s) ! | have executed these Articles o | f Incorporation this |
| | , 19 | | |
| | X | conette Mi | 100) 4/7/96 (Scal) |
| | | · · · · · · · · · · · · · · · · · · · | (Scal) |
| | | | (Scal) |

CERTIFICATE AND ACKNOWLEDGEMENT OF REGISTERED AGENT

CERTIFICATE OF REGISTERED AGENT



Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted: The above corporation, desiring to organize under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation

| ut <u>23</u> | o mississippi ane |
|----------------------|--|
| | J. Cloud, F/ 34769 |
| has named | (EONEHE MILES |
| located at the afore | said address, as its Registered Agent to accept service of process |
| within this state. | |

ACKNOWLEDGEMENT

Having been named as Registered Agent to accept service of process for the above stated corporation at the place designated in this certificate, and being familiar with the obligations of that position, I hereby accept to act in this capacity, and agree to comply with the provisions of Florida Law in keeping open said office.

(registered agent)