

P96000073539

Secretary of State
Corporate Division
The Capitol
Tallahassee, FL 32304

Re: TOMMA INC.

8000019370418
-08/30/96---01072---009
****122.50 ****122.50

Gentlemen:

I am enclosing an original and a copy of Articles of Incorporation for the above named corporation. In addition, a check in the sum of \$122.50 is enclosed which represents the following fees:

Filing Fee	\$35.00
Certified Copy	\$52.50
Registered Agent Fee	\$35.00

Total	\$122.50 .

Please file the original of the enclosed Articles of Incorporation and return a certified copy to the undersigned.

Your prompt attention to this matter would be appreciated.

Very Truly Yours,

TOMMY F FREDA PRESIDENT
753 CREEK WATER TERRACE SUITE 215
LAKE MARY, FL 32746

EFFECTIVE DATE
AUG 24 1995

FILED
96 AUG 30 PM 12:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AB 9/5

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AUG 24 1995

FILED
96 AUG 30 PM 12:07
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Articles of Incorporation

The undersigned, acting as Incorporator of a corporation under the Florida Business Act, adopt the following Articles of Incorporation for such corporation:

Article I
Name of Corporation

The name of the corporation is TOMMA INC.

Article II
Principal Office / Mail Address

The principal office of the corporation is :753 CREEKWATER TERRACE
SUITE 215
LAKE MARY, FL 32746
The mailing address of the corporation is: 753 CREEKWATER TERRACE
SUITE 215
LAKE MARY, FL.32746

Article III
Capital Stock

The number of shares the corporation is authorized is 1000 shares. The stock shall be one class.

Article IV
Preemptive Rights

Each shareholder of this corporation shall have the right to purchase shares of any class, kind or series of stock in this corporation that may from time to time be issued, including shares from the treasury of this corporation, in the ratio that the number of shares he holds at the time of issue bears to the total number of shares by any shareholder who does not exercise it and pay for the shares preempted within thirty (30) days of receipt of a notice in writing from the corporation, stating prices, terms and conditions of the issue of shares, and inviting him to exercise his preemptive rights. This right may also be waived by affirmative written waiver submitted by the shareholder to the corporation within thirty (30) days of the receipt of the notice from the corporation.

Article V
Initial registered Office and Agent

The name and address of the initial registered agent and office of this corporation is:

TOMMY F. FREDA
753 CREEKWATER TERRACE SUITE 215
LAKE MARY, FL. 32746

Article VI
Incorporators

The name and address of the original incorporator is:
TOMMY F FREDA
753 CREEKWATER TERRACE SUITE 215
LAKE MARY FL 32746

Article VII
Officers

The name and address of the initial officer is:
TOMMY F FREDA, President
753 CREEKWATER TERRACE SUITE 215
LAKE MARY FL 32746

Article VIII
Purpose

The purpose of this corporation is to carry on any business permitted and allowed under the laws of the State of Florida and the United States.

Article IX
Par Value

The par value for the authorized shares is: \$150.00

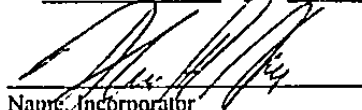
Article X
Personal Liability

The shareholders of the corporation shall not have personal liability for the debts of the corporation. The corporation shall indemnify all Officers and Directors from any liabilities of the corporation not set forth in Florida Law.

Article XI
Effective Date

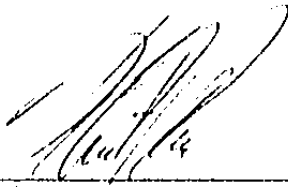
The effective date of these Articles of Incorporation is:
AUGUST 24, 1996

In witness whereof, the undersigned Incorporator has executed these Article of Incorporation
this 28 day of AUGUST, 1996



Name, Incorporator

Having been named a registered agent for the above stated corporation, I hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative the proper and complete performance of my duties and I accept the duties and obligations of Section 607.0505, Florida Statutes (1993)



Name, Registered Agent

FILED
96 AUG 30 PM 12:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DEBIT MEMORANDUM 9000068

DATE FOR OFFICIAL USE NUMBER

STATE

STATE OF FLORIDA
OFFICE OF STATE TREASURER
TALLAHASSEE FLORIDA

FUND	AMOUNT	REASON RETURNED	KEY #
GENERAL REVENUE	0.00	INSUFFICIENT FUNDS	1
TRUST	253.75	ACCOUNT CLOSED	2
OTHER		UNCOLLECTED FUNDS	3
TOTAL	253.75	OTHER	4

CROSS
REF

SAMAS CODE DISTRIBUTION

CROSS REF	SAMAS CODE	REASON	AMOUNT
12	45-20-2-130001-45300000-00-000100-00	1	61.25
12	45-20-2-130001-45300000-00-000100-00	1	70.00
12	45-20-2-130001-45300000-00-000100-00	1	122.50

GRAND TOTAL:

\$ 253.75

RECEIVED
SEP 24 PM 2:23
FINANCIAL MANAGEMENT

71035-A

700001971107
-10/11/96--01004--002
*****15.00 *****15.00

Process Date: 09/11/96

900001968079
-10/08/96--01070--009
****122.50 ****122.50

The above named fund(s) has been reduced by the amount of
this check(s) under authority of Section 215.34, F.S.

Bill Nelson
State Treasurer