

TRANSMITTAL LETTER

P96000083578

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

100001966811  
-10/08/96--01004--015  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT: ALEXACORP *Alexa Corp.*  
(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for:

\$70.00  
Filing Fee

\$78.75  
Filing Fee  
& Certificate

\$122.50  
Filing Fee  
& Certified Copy

\$131.25  
Filing Fee,  
Certified Copy  
& Certificate

Additional Copy Required

FILED  
96 OCT -7 AM 11:43  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*Michael Rose  
you author to  
correct corp  
name as 2 words  
10/10/96*

FROM: Michael J. Rose  
Name (printed or typed)

9185 S.E. Mystic Cove Terr  
Address

Hobe Sound FL 33455  
City, State & Zip

561-546-2041  
Daytime Telephone number

*[Signature]*  
*10/10*

NOTE: Please provide the original and one copy of the articles.

## ARTICLES OF INCORPORATION

*The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.*

### ARTICLE I NAME

The name of the corporation shall be:

ALEXA CORP.

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TALLAHASSEE FLORIDA

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### ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

9185 S.E. Mystic Cove Terr  
Hobe Sound FL 33455

### ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

Seven thousand five hundred  
at One dollar Par

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Michael J. Rose  
9185 S.E. Mystic Cove Terr  
Hobe Sound FL 33455

**ARTICLE V INCORPORATOR(S)**

**See instructions for officers/directors**

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Laura J. Rose .... President  
9185 S.E. Mystic Cove Terr  
Hobe Sound FL 33455

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

1st day of October, 19 96.

(An additional article must be added if an effective date is requested.)

  
\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

**Notarization is not required**

**NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.**

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: ALEXA CORP.

2. The name and address of the registered agent and office is:

Michael J. Rose  
(NAME)

9185 S.E. Mystic Cove Trce  
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

Hobe Sound FL 33455  
(CITY/STATE/ZIP)

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*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

Michael J. Rose  
(SIGNATURE)

10/1/96  
(DATE)