199000017522

WEBAD DESIGNS, INC

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

600002437636--4 -02/23/98--01056--006 *****78.75 ******78.75

	(Proposed co	orporate name - must include	Suriix)		
Enclosed is an original	and one(1) copy of the article	es of incorporation and a	check for:	7	
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	□\$122.50 Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate		
		ADDITIONAL CO	PY REQUIRED		
FROM: Jim & Jodi Stafford Name (Printed or typed)				98 FI SECRE TALLAI	
12736 FORESTEDGE CIRCLE Address				FEB 23 AM NETARY OF S AHASSEE, FL	
ORLANDO FC 32828 City, State & Zip				9 25 STATE LORIDA	•
1407 - 851 - 3681 Daytime Telephone number				•	
AUTHORIZATION BY F CORRECT SHARES + DATE 2-24-98					
DOC. EXAM AM					
NO	OTE: Please provide the or	riginal and one copy of	the articles.	gn r	24-98

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

NAME ARTICLE I

The name of the corporation shall be:

WEBAD DESIGNS, INC.

PRINCIPAL OFFICE ARTICLE II

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

P.O. BOX

12736 FORESTEDGE CIRCLE

ORLANDO FL

ARTICLE III SHARES

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

ONE

INITIAL REGISTERED AGENT AND STREET ADDRESS ARTICLE IV

The name and Florida street address of the initial registered agent are:

SHAFFORD

12736 FORESTEDSE CIRCLE ORLANDO FL **32879**

ARTICLE V

INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

12736 FORESTEDGE CIRCLE

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

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

- SEE JIM STAFFORD'S SIGNATURE ABOVE -

Signature/Registered Agent

Date