TRANSMITTAL LETTER

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

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Thunder Byte Systems, (Proposed corporate name - must inclu-

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

\$131.25

& Certified Copy

Filing Fee, Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

FROM: Lisa M. Bleil
Name (Printed or typed)

15011 S. Clark Are

Tanpa, FL 33629 City, State & Zip

813-839-Ø188 // 813-289-Ø87Ø

Daytime Telephone number

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

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.

ARTICLE I NAME

The name of the corporation shall be: ThunderByte Systems, Inc.

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ARTICLE II PRINCIPLE OFFICE

The principle place of business and mailing address of this corporation shall be: 1011 South Clark Avenue, Tampa, Florida 33629

ARTICLE III SHARES

The number and shares of stock that this corporation is authorized to have outstanding at any one time is: 100 Shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are: Lisa Maria Bleil, 1011 South Clark Street, Tampa, Florida 33629

ARTICLE V INCORPORATOR

The <u>name and address</u> of the incorporator to these Articles of Incorporation are: Lisa Maria Bleil, 1011 South Clark Street, Tampa, Florida 33629

Signature/Incorporator

(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.

Signature/Registered Agent

Date