

TRANSMITTAL LETTER

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

800002447888--7
-03/05/98--01029--001
*****78.50 *****78.50

SUBJECT: SIGNAL ZERO INC.
(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

FROM: SCOTT FINNEN
Name (Printed or typed)

14450 NE 75TH ST
Address

BROOKS FL 32621
City, State & Zip

352-486-5111
Daytime Telephone number

98 MAR -5 PM 2:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

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

3/5/98 T.M.

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:
SIGNAL ZERO INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:
14450 NE 75TH ST
BRONSON FL 32621

ARTICLE III SHARES

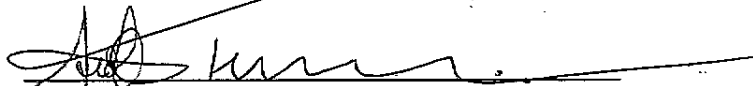
The number of shares of stock that this corporation is authorized to have outstanding at any one time is:
1000.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:
SCOTT FINNEN
14450 NE 75TH ST
BRONSON FL 32621

ARTICLE V INCORPORATOR


The name and address of the incorporator to these Articles of Incorporation are:
SCOTT FINNEN
14450 NE 75TH ST
BRONSON FL 32621


Signature/Incorporator
SCOTT FINNEN

3/4/97
Date

(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
SCOTT FINNEN

3/4/97
Date

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TALLAHASSEE, FLORIDA