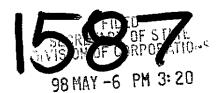
TRANSMITTAL LETTER

P9800004

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



900002514339--8 -05/06/98--01137--001 ******70.00 ******70.00

SUBJECT:	Cyber Inks Co.		
	(Proposed o	corporate name - must include	e suffix)
Enclosed is an original an	d one(1) copy of the article	es 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 CO	PY REQUIRED
FROM:	Jill J Name (F	inorio rinted or typed)	
	719 N.	Rainbow Drive Address	
_		ood, FL 33021	·
	City, State & Zip		
	(954)	967-0754	
	Daytime Telephone number		

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

14 csv 196

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:

CYBER INKS CO.

PRINCIPAL OFFICE ARTICLE II

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

719 N. Rainbow Drive, Hollywood, FL 33021

SHARES ARTICLE III

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

(100) One Hundred

INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Jill Jinorio

719 N. Rainbow Drive

Hollywood, FL 33021

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

Jill Jinorio 719 N. Rainbow Drive Hollywood, FL 33021

(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