

TRANSMITTAL LETTER

P98000054072

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

SUBJECT: Inktown Inc.
(Proposed corporate name - must include suffix)

800002560038--0
-06/15/98--01096--021
****131.25 ****131.25

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: Sandra E. Johnson 6-12-98
Name (Printed or typed)

P.O. Box 8709
Address

Jacksonville, Fla. 32239-8709
City, State & Zip

904-745-8069
Daytime Telephone number

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
98 JUN 15 AM 10:01

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

RP
06-17-98

98 JUN 15 AM 10:01

Form A. Articles of Incorporation

Articles of Incorporation

1. The name of the corporation shall be:

INKTOWN INCORPORATED

2. The principal place of business and mailing address of the corporation is:

pob:2641 UNIVERSITY BLVD. H110 , JACKSONVILLE, FL 32211
ma: P.O.BOX 8709, JACKSONVILLE, FL. 32239-8709

3. The corporation shall have the authority to issue 10,000 shares of stock.

4. The registered agent of the corporation is Sandra E. Johnson and the registered street address is 401 ML KING DR. LAKE CITY, FL.32055.

5. The initial Board of Directors shall have 2 member(s) whose name(s) and address(es)

is/are as follows: ANDREA D JOHNSON 2641 UNIVERSITY BLVD #H110
JACKSONVILLE FL.32211

The number of directors may be raised or lowered by amendment of the bylaws of the corporation but shall in no case be less than one.

6. The incorporator of this corporation is SANDRA E JOHNSON whose street address is 401 ML KING DR. LAKE CITY FL.32055

Dated 6-12-98


Incorporator

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 am familiar with and accept the obligations of my position as registered agent.

Dated 6-12-98


Registered Agent