## TRANSMITTAL LETTER

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

Proposed corporate name - must include suffix)				
closed is an original a	nd one(1) copy of the articl	les 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 Co & Certificat	
FROM:	Roy A.	ADDITIONAL CO	PY REQUIRE	Z <b>D</b>
—		Address		end To
	407- 788	Florida 2 State & Zip  - 2878 elephone number	32779	98 JUL -9 AM 9: 3 SECRETARY OF STAT ALLAHASSEE, FLORI

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

## ARTICLES OF INCORPORATION

NAME

ARTICLE I

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

The name of the corporation shall be: TELEGIFT, COM, INC	<u>.</u>
ARTICLE II PRINCIPAL OFFICE  The principal place of business and mailing address of this corporation shall be:  506 Estates Place  Longwood Floridg 327	79
ARTICLE III SHARES  The number of shares of stock that this corporation is authorized to have outstanding at any one to	
100,000	SECRET
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS	APPR FIL FIL AHASS
The name and Florida street address of the initial registered agent are:  Poy A. Tanner  506 Estates Place  Longwood, FL 32779	ND LED 3 AM 9: 39 3Y OF STATE SEE, FLORID
ARTICLE V INCORPORATOR	## 39 ···
The name and address of the incorporator to these Articles of Incorporation are:  Roy A. Tanner  506 Estates Place  Longwood, FL 32799  Signiture/Incorporator  Date	·
11/2	

(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

ghature/Registered Agent

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