

P98000070389

TRANSMITTAL LETTER

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

100002611431--3
-08/10/98--01048--008
*****78.75 *****78.75

SUBJECT: Hyperttron dot Com 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: Michael D Carter
Name (Printed or typed)

519 Frances Terrace
Address

Daytona Beach, FL 32118
City, State & Zip

904-255-2298
Daytime Telephone number

98 AUG 10 PM 1:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

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

9/8/12/98

ARTICLES OF INCORPORATION

1. The name of the corporation shall be: Hypertron dot Com inc.
2. The principal place of business and mailing address of the corporation is: 519 Frances Terrace Daytona Beach, FL 32118
3. The corporation shall have the authority to issue 10,000 shares of stock.
4. The registered agent of the corporation is Michael D Carter and the registered street address is 519 Frances Terrace Daytona Beach, Florida 32118.
5. The initial Board of Directors shall have 1 member(s) whose name(s) and address(es) is/are as follows: Michael D Carter
519 Frances Terrace
Daytona Beach, FL 32118

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 Michael D Carter whose street address is 519 Frances Terrace, Daytona Beach FL 32118

Dated 8-7-1998

Michael D Carter
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 8-7-1998

Michael D Carter
Registered Agent

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SECRETARY OF STATE
TALLAHASSEE FLORIDA