

TRANSMITTAL LETTER

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
98 AUG 12 PM 12:46

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

SUBJECT: Wow Communications INC  
(Proposed corporate name - must include suffix)

800002613978--4  
-08/12/98--01060--019  
\*\*\*\*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: Corinne Bloom  
Name (Printed or typed)

3144 Sheridan Ave  
Address

Miami Beach FL, 33140  
City, State & Zip

(305) 772-6924  
Daytime Telephone number

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

D. BROWN AUG 17 1998

## 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.

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### ARTICLE I NAME

The name of the corporation shall be:

Wow Communications INC

### ARTICLE II PRINCIPAL OFFICE

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

3144 SHERIDAN AVE MB, FL 33140

### ARTICLE III SHARES

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

1

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

CORINNE Bloom  
3144 Sheridan AVE  
MB, FL 33140

### ARTICLE V INCORPORATOR

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

CORINNE Bloom  
3144 Sheridan AVE  
MB, FL 33140

Corinne Bloom

Signature/Incorporator

July 1 / 98

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

Corinne Bloom

Signature/Registered Agent

July 1 / 98

Date