P98000096890

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

900002687909--9 -11/16/98--01047--002 ******78.75 ******78.75

SUBJECT: MOBILTRONICS CORP.

(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

\$131.25

g Fee Filing Fee

Filing Fee,

& Certified Copy

Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

8mc, 1898

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

FILED

ARTICLES OF INCORPORATION

98 NOV 16 AM 8: 10

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

SECRETARY OF STATE TALLAHASSEE, FLORIDA

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The name of the corporation shall be:

MOBILTRONICS

CORP

ARTICLE II PRINCIPAL OFFICE

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

4410 SW 137 COURT MIAMI FL 33175

ARTICLE III SHARES

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

100 SHATES

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

FELICIA LI - 4410 SW 137 Court Miami Fl. 33175

ARTICLE V INCORPORATOR

The <u>name and address</u> of the incorporator to these Articles of Incorporation are:

FELICIA LI 4410 SW 137 COURT MIAMI FL 33175

Signature/Incorporator

ctober 15,1998

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

Signature/Registered Agent

Date