TRANSMITTAL LETTER

8000105020 Department of Stat Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 INTENSE WEB SOLUTIONS, INC. SUBJECT: (Proposed corporate name - must include suffix) ****87.50 ******87.50 Enclosed is an original and one(1) copy of the articles of incorporation and a check for : **XXX**\$87.50 \$78.75 \$78.75 \$70.00 Filing Fee, Filing Fee Filing Fee Filing Fee & Certificate of Status & Certified Copy Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED DARIN J. GREY FROM: Name (Printed or typed) 5101 EXCELLENCE BLVD. SUITE P312 Address 33617 TAMPA. FL City, State & Zip

F. CHESSER DEC 1 8 1998

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

Daytime Telephone number

ARTÍCLES OF INCORPORATION

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

AR1	TICLE	I	NAME

The name of the corporation shall be:

INTENSE WEB SOLUTIONS, INC.

ARTICLE II PRINCIPAL OFFICE

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

INTENSE WEB SOLUTIONS, INC.

FLORIDA

5101 Excellence Blvd. SUITE P312 TAMPA, FL 33617

ARTICLE III SHARES

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

1000 shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

DARIN J. GREY

5101 EXCELLENCE BLVD. SUITE P312

TAMPA, FL 33617

ARTICLE V INCORPORATOR

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

DARIN J. GREY

5101 EXCELLENCE BLVD. SUITE P312

TAMPA, FL 33617

Signature/Incorporator/

/2//5/98 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

Signature/Registered Agent

Date