TRANSMITTAL LETTER

798000107273

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

cus

SUBJECT:

VERONA VENTURES, 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

\$131.25

Filing Fee & Certified Copy Filing Fee, Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

VERONA

Name (Printed or typed)

3314 VILLA ROSA

<u>TAMPA</u>, FL 33611 City, State & Zip

(8/3) 258-0852 Daytime Telephone number

F. CHESSER DEC 2 9 1998

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

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.

ARTICLE I NAME

The name of the corporation shall be:

VENTURES, INC. VERONA

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 3314 VILLA ROSA AVE.

TAMPA, FL 33611

ARTICLE III SHARES

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

1,000,000

INITIAL REGISTERED AGENT AND STREET ADDRESS

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

BRETT VERONA

3314 VILLA ROSA

TAMPA, FL 33611

ARTICLE V INCORPORATOR

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

BRETT VERONA 3314 VALLA ROSA

TAMPA, PL 33611 ARTICLE VI -EPPECTIVE DATE

THE EFFECTIVE DATE OF THESE ARTICLES - THIS INCORPORATION SHALL BE JANUARY 1, 1999

Signature/Incorporator

(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