

TRANSMITTAL LETTER
P99000022409

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

800002798438--6
-03/08/99--01146--009
*****78.75 *****78.75

SUBJECT: ValuSell, 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 of Status

☒ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: Jane C. Bloom
Name (Printed or typed)

13581 Columbine Ave.
Address

Wellington FL 33414
City, State & Zip

561-793-9759
Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

99 MAR -8 AM 8:59

FILED

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

CB
3-11-99
2

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:

ValuSell, Inc.

ARTICLE II PRINCIPAL OFFICE

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

13581 Columbine Avenue
Wellington FL 33414

ARTICLE III SHARES

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

1000 at no par value

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

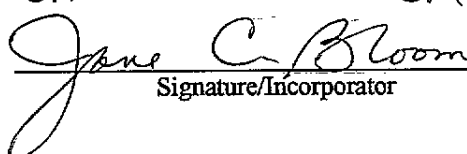
The name and Florida street address of the initial registered agent are:

Robert Bloom
13581 Columbine Avenue
Wellington FL 33414

ARTICLE V INCORPORATOR

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

Jane C. Bloom
13581 Columbine Avenue
Wellington FL 33414

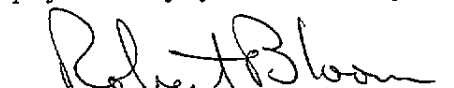
JANE C. BLOOM


Signature/Incorporator

3-3-99

Date

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

3-3-99

Date

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TALLAHASSEE, FLORIDA