

TRANSMITTAL LETTER

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

SUBJECT: VoNet Technologies Inc.
(Proposed corporate name - must include suffix)

500002813535-3
-03/22/99-01100-022
*****78.75 *****78.75

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: ROBERT M. VOGT
Name (Printed or typed)

3620 WEST STERLING CIRCLE
Address

TAMPA, FLORIDA 33629
City, State & Zip

(813) 831-2431
Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

99 MAR 22 AM 11:39

FILED

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

JB
3-22-99
2
no copy

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:

VoNet Technologies Inc.

ARTICLE II PRINCIPAL OFFICE

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

3620 West Sterling Circle
Tampa, Florida 33629

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 (one million)

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Robert M. Vogt
3620 West Sterling Circle
Tampa, Florida 33629

ARTICLE V INCORPORATOR

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

Robert M. Vogt
3620 West Sterling Circle
Tampa, Florida 33629

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TALLAHASSEE, FLORIDA

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Robert M. Vogt
Signature/Incorporator

3-17-99
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.

Robert M. Vogt
Signature/Registered Agent

3-17-99
Date