TRANSMITTAL LETTER S 8

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

SUBJECT: YoF	ormstian Techno (Proposed co	S Peciel Ex Dog 4 Diporate name - must includ	suffix) , ***********************************	 126290 901002005
Enclosed is an original and	d one(1) copy of the articles	s of incorporation and a c	check for :	
□ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate	Filing Fee & Certified Copy	\$131.25 Filing Fee, Certified Copy & Certificate	
FROM	Lildhorry <u>Information</u> Tech Name (Pri Mi39 Blair M			APPROVED AND FILED 99 JUN 22 PM 5: 08
2.	407-766.1	lephone number		・ され ・

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.	SECR	Nr 66
ARTICLE I NAME The name of the corporation shall be:	HASSEE,	M 22 PH
Information Technology speciality Systems corp	F STATE FLORIDA	90 :S H
ARTICLE II PRINCIPAL OFFICE The principal place of business and mailing address of this corporation shall be: M139 Blair Or ゴバョルカッ Florida 32819	•	-
ARTICLE III SHARES The number of shares of stock that this corporation is authorized to have outstanding at any one to	ime is:	<u>:-</u>
The Million Shares @ Par Value Q		
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS		
The name and Florida street address of the initial registered agent are: NEW AGE Property Mgt + Consulting Inc 1242 N. Pue Hills Road Suite Lot	-	
Orlando FL 32808		
ARTICLE V INCORPORATOR The name and address of the incorporator to these Articles of Incorporation are:	es.	.2
Libbarry Jiowan		
MI39 Blair Dr		
77/2Ndo, KL 32519		
Sildharry Tiguan		
Signature/Incorporator 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

June 1, 1999
Date

1.00