TRANSMITTAL LETTER

Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 SPY SUPPLY, INCORPORATED SUBJECT: (Proposed corporate name - must include suffix) 300002919653---06/30/99--01059-<u>-</u>002 *****78.75 *****78.75 Enclosed is an original and one(1) copy of the articles of incorporation and a check for: \$78.75 \$70.00 \$78.75 ■ \$87.50 Filing Fee Filing Fee Filing Fee Filing Fee, & Certificate of Status & Certified Copy Certified Copy & Certificate of Status

ADDITIONAL COPY REQUIRED

FROM:

CHRISTOPHER LEBOY SPENCER

Name (Printed or typed)

3303 BAY SHORE DRIVE

Address

7AMPA FLORIDA 3360M

City, State & Zip

(813) 288-0332

Daytime Telephone number

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

ARTICL	ES	OF	IN	COR	POR.	ATION
		~_	.			LILI

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

ARTICL	\boldsymbol{E}	1	NAME

The name of the corporation shall be:

SPY SUPPLY INCORPORATED

ARTICLE II PRINCIPAL OFFICE

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

3303 BAY SHORE DRIVE TAMPA, FL. 3360M

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:

CHRISTOPHER LEROY SPENCER

3303 BAY SHOPE DRIVE

TAMPA, Florida 3360M

ARTICLE V INCORPORATOR

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

CHRISTOPHER LEBOY SPENCER

3303 BAY SHOPE DRIVE

TAMPA, Florida 3360M

Christophen Jobs Space

6-23-99

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

SEE SIGNATURE ABOVE

6-23-99

Signature/Registered Agent

Date