TRANSMITTAL LETTER

9900060003

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



SUBJECT:	WWWSOURCE,	INC.	
			(Proposed cornorate name - must include suffix)

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sea is an origin	iai and one(1) copy of the article	es of incorporation and a	CHECK for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED

Name (Printed or typed)

7211 SW 97 Lane
Address

Gainesville, FL 32608
City, State & Zip

(352) 333-4255

Daytime Telephone number

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:

WWWSOURCE, INC.

ARTICLE II PRINCIPAL OFFICE

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

7211 SW 97 Lane Gainesville, FL 32608

ARTICLE III SHARES

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

One Hundred (100)

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Lee Ann Padgett
7211 SW 97 Lane, Gainesville, FL 32608

ARTICLE V INCORPORATOR

The <u>name and address</u> of the incorporator to these Articles of Incorporation are:

Lee Ann Padgett
7211 SW 97 Lane, Gainesville, FL 32608

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

Date