TRANSMITTAL LETTER

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

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SUBJECT:	ENER-QI SOLUTIONS INC.							
_	(Proposed corporate name - must include suffix)							

Enclosed is an original	al 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	S78.75 Filing Fee & Certified Copy ADDITIONAL, CO	\$87.50 Filing Fee, Certified Co & Certificat Status PY REQUIRE	e of	
FROM:	Robert Dennis Name (Pr	Peters inted or typed)	TALLAH	100 JUL	40
	17460 Fuchsia	- Rd address	ART OF STATE ASSEE FLORIDA	-8 AM	
		. 33912 State & Zip	ORIDA	8: 59	O
	281-8	3719 elephone number			

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

ARTICLES OF INCORPORATION

Signature/Registered Agent

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:
ENER-QI SOLUTIONS Inc.
ARTICLE II PRINCIPAL OFFICE
The principal place of business and mailing address of this corporation shall be: 17460 FUCHSIA Rd. Pt. MNERS, FL. 33912
ARTICLE III SHARES
The number of shares of stock that this corporation is authorized to have outstanding at any one time is:
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS The name and Florida street address of the initial registered agent are: Robert Dennis Peters 1746 Fuchsia Rd. Ft. MYERS, FL. 33912
ARTICLE V INCORPORATOR
The <u>name and address</u> of the incorporator to these Articles of Incorporation are:
Robert Dennis Peters 17460 Fuchsia Rd. Ft. myers, FL. 33912
F-19-99
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 L19-09

Date