## TRANSMITTAL LETTER 499000064807

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

900002930829<sup>---2</sup> -07/14/99--01053--006 \*\*\*\*\*\*78.75

SUBJECT:	lime	<u>On</u>	Line		no
		(Proposed c	orporate name - m	ust include su	ıffix)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

\$70.00

**≅**\$78.75

Filing Fee

Filing Fee

& Certificate of Status

□\$78.75

\$87.50

Filing Fee

Filing Fee,

& Certified Copy

Certified Copy

& Certificate of

Status

ADDITIONAL COPY REQUIRED

Name (Printed or typed)

Name (Printed or typed)

Address

City, State & Zip

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

Daytime Telephone number

## JARTICLES OF INCORPORATION

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

FILED 99 JUL 14 PM 5: 38 TALLAHASSEE, FLORIS

ARTICLE I NAME

The name of the corporation shall be:

Time On Line Inc

ARTICLE II PRINCIPAL OFFICE

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

1747 Out lemen Rd Sarasola FI 34232

ARTICLE III SHARES

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

100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

ARTICLE V INCORPORATOR

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

Time On Line Inc 1947 Cattle men Rd Sarasola FI 34232

Signature/Incorporator

7-13-49

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

YUKYUN MUULU Signature/Registered Agent 7-13-99

Date