TRANSMITTAL LETTER 990066170

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

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SUBJECT:Enclosed is an origina	Proposed corporation and one (1) copy of the article	ate name - must include suffi	x) P	FILED AN 7: 22
□ \$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	Dr.
FROM: Name (Printed or typed) 3116 N Factor of Huy H 213 Address				
	Lìgh City,	thouse Point, 1 State & Zip 973-893-6		
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.

FILED AN 7:22

ARTICLE I NAME

The name of the corporation shall be: Adoni Internet Services, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 3116 N Federal Hwy, Suite 213, Lighthouse Point, FL 33064

ARTICLE III SHARES

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

Ten Million

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are: John Ennis 3116 N Federal Hwy, Suite 213 Lighthouse Point, FL 33064

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are: John Ennis 3116 N Federal Hwy, Suite 213 Lighthouse Point, FL 33064

	7-14-99
Signature/Incorporator	Date

Having been named as resistered 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