## Department of State Division of Corporations

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

SUBJECT:	ectronic liensection	ate name - must include suffi	Corp.	
	(Proposed corpor	ate name - must include suffi	SECRETARY SECRETARY	
Enclosed is an original and one(1) copy of the articles 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	
FROM:	Joe Lond Name (Pr	inted or typed)		
6091 Johns Rd. Suite 4				
	Tempe, E	11 5 <u>33634</u> State & Zip	00002961041—6 -08/16/99-01113-013 ******78.75 ******78.75	
	B13 Z49 Daytime Te	) – 68\8 elephone number	<del></del> .	

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

of and

## 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.

The name of the corporation shall be:
Electronic Transaction Exchange Corporation
ARTICLE II PRINCIPAL OFFICE
The principal place of business and mailing address of this corporation shall be:
6610 Sezfzirer Dr.
Tampa, FL 33615
ARTICLE III SHARES
The number of shares of stock that this corporation is authorized to have outstanding at any one time is:
One Thousand (1,000)
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and Florida street address of the initial registered agent are:
Herry J. Londot 6610 Seztairer Dr.
ARTICLE V INCORPORATOR
The name and address of the incorporator to these Articles of Incorporation are:
Herry J. Londot
Herry J. Londot 6610 Sezfeirer Dr.
Tampe, FL 33615
12 Aug 20
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 i
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.
13 Aug 99
Signature/Registered Agent Date