

P99000075323 <sup>Form 1</sup>

TRANSMITTAL LETTER

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

SUBJECT:

VALOR Com, Inc.

(Proposed corporate name - must include suffix)

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

☐ \$122.50  
Filing Fee  
& Certified Copy

☐ \$131.25  
Filing Fee,  
Certified Copy  
& Certificate

ADDITIONAL COPY REQUIRED

FROM:

JOHN HUMMEL

Name (Printed of typed)

1624 LAGO VISTA BLVD

Address

PALM HARBOR, FL 34685

City, State & Zip

(727) 787-3867

Daytime Telephone number

500002963055--0  
-08/18/99-01049-013  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

99 AUG 18 AM 11:43

FILED

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

758/24/99

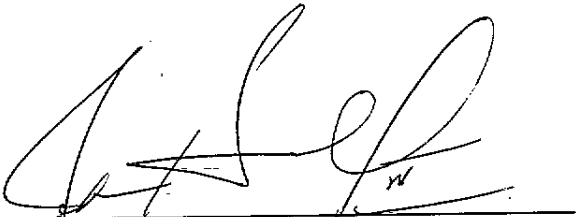
## ARTICLES OF INCORPORATION

1. The name of the corporation shall be: VALOR Com, Inc.
2. The principal place of business and mailing address of the corporation is: 2519 McHUGHEN BOOTH RD. CLEARWATER, FL 33759 SITE 510-180
3. The corporation shall have the authority to issue 100,000 shares of stock.
4. The registered agent of the corporation is JOHN HUMMELL IV and the registered street address is 1624 LAGO VISTA BLVD. PALM HARBOR Florida 34685.
5. The initial Board of Directors shall have 1 member(s) whose name(s) and address(es) is/are as follows: JOHN HUMMELL IV  
1624 LAGO VISTA BLVD. PALM HARBOR, FL 34685

The number of directors may be raised or lowered by amendment of the bylaws of the corporation but shall in no case be less than one.

6. The incorporator of this corporation is JOHN HUMMELL IV whose street address is 1624 LAGO VISTA BLVD. PALM HARBOR, FL 34685

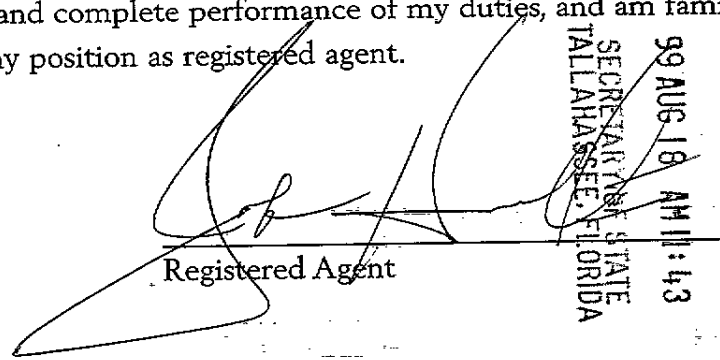
Dated 8/15/99



Incorporator

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 am familiar with and accept the obligations of my position as registered agent.

Dated 8/15/99



Registered Agent

99 AUG 18 AM 11:43  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED