TRANSMITTAL LETTER Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 500002969125 Enclosed is an original and one(1) copy of the articles of incorporation and a check for: \$70.00 \$78.75 **2**\$78.75 \$87.50 Filing Fee Filing Fee Filing Fee Filing Fee, & Certificate of Status & Certified Copy Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED

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

Daytime Telephone number

28/24

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florid	-
Business Corporation Act, hereby adopts the following Articles of Incorporation.	и
1 strain to y descript the journal of the corporation.	

ARTICLE I NAME	
The name of the corporation shall be:	
International Cable Goys Inc	٠٠ <u>-</u> ٠٠ ٠ ـ ١٠٠
ARTICLE II PRINCIPAL OFFICE	
The principal place of business and mailing address of this corporation shall be:	6
1080 Broadway Ave	
Ormand Beach FL 32174	3
AKTICLE III SHARES	
The number of shares of stock that this corporation is authorized to have outstanding at any one time is	· O. : - <u> </u>
\boldsymbol{l}	
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS The name and Florida street address of the initial registered agent are:	* * 78.3 to
Enrique De Jesus Brenes	
Enrique De Jesus Brenes 1080 Broadway Ave Ormand Beach FL 32174	· · · · · · · · · · · · · · · · · · ·
ARTICLE V INCORPORATOR	
The <u>name and address</u> of the incorporator to these Articles of Incorporation are:	· · · · · · · · · · · · · · · · · · ·
Enrique De Jesus R	
1080 13ran dua 1	-
Ormand Beach FL 32174	- 148 = 1 124 = 2
0 2 32179	
8-24-99	
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

Signature/Registered Agent

8-24-99

Date