TRANSMITTAL LETTER
9900016548

99 AUG 23 PM 4: 48
SECRETARY OF STATE
TALLAHASSEE, FI OPIN:

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

SUBJECT: SALON COMMERCE CORPORATION				
	(Proposed corpor	rate name - must include suffi	ix)	
		4(D0002966 -08/23/930 *****87.50	7843 1096012 *****87.50
Enclosed is an origina	al and one(1) copy of the article	s of incorporation and a	check for:	_
\$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL COI	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
FROM:	Paul Cappola			
	Name (Printed or typed) 4905 34th Street South #108 Address			
	St. Petersburg, FL 33711 City, State & Zip			٠.,
		or 727-463-119 lephone number	23	

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.

ARTICLE I NAME

The name of the corporation shall be:

SALON COMMERCE CORPORATION

ARTICLE II PRINCIPAL OFFICE

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

4905 34th Street South #108 St. Petersburg, FL 33711

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:

Paul Cappola 4905 34th Street South #108 St. Petersburg, FL 33711

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Paul Cappola 4905 34th Street South #108 St. Petersburg, FL 33711

Signature/Incorporator

<u>August 19, 1999</u>

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

August 19, 1999

Date