

P99000081614

TRANSMITTAL LETTER

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

900002982489--4
-09/09/99-01058-013
*****78.75 *****78.75

SUBJECT: Our Town Publications, Inc.
(Proposed corporate name - must include suffix)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

99 SEP - 8 PM 3:41

FILED

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

 \$70.00
Filing Fee

 X \$78.75
Filing Fee
& Certificate

 \$122.50
Filing Fee
& Certified Copy

 \$131.25
Filing Fee,
Certified Copy

-- Additional Copy Required --

*Notes
Notified of change
by Note of objection
T.B.*

FROM: Mark Lipten
Name

124 North Lost Lake Lane
Address

Casselberry, FL 32707
City, State & Zip

(407) 699-4760
Daytime Telephone number

9/15/99
T.B.

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:
Our Town Publications, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:
**124 North Lost Lake Lane
Casselberry, FL 32707**

ARTICLE III SHARES

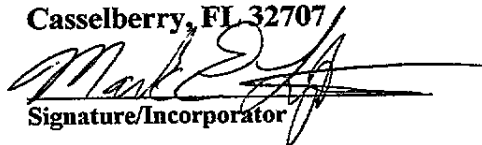
The number of shares of stock that this corporation is authorized to have outstanding at any one time is:
1000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:
**Mark E. Lipten
124 North Lost Lake Lane
Casselberry, FL 32707**

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:
**Mark E. Lipten - President & Secretary
124 North Lost Lake Lane
Casselberry, FL 32707**


Signature/Incorporator

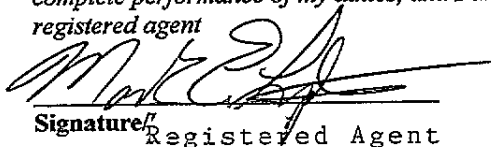
9-7-99
Date

**Sandra B. Lipten - Vice President & Treasurer
124 North Lost Lake Lane
Casselberry, FL 32707**


Signature/Incorporator

9-7-99
Date

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 of Registered Agent

9-7-99
Date

FILED
99 SEP -8 PM 3:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA