P99000089275

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

900003007699--7 -10/08/99--01084--002 *****78.75 *****78.75

SUBJECT:	Market-Write, Inc.
	(Proposed corporate name - must include suffix)

Enclosed is an original and one(1) copy of the articles of incorporation
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□ \$70.00 Filing Fee	■ \$78.75 Filing Fee & Certificate of Status	Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of
			Status

ADDITIONAL COPY REQUIRED

FROM: Michelle Brown
Name (Printed or typed)
7847 Ambleside Way
Lake Worth FC 33467 City, State & Zip
(954) 35/-6342 Daytime Telephone number

FILED
1999 OCT -6 PM 4: 38
SECRETARY OF STATE

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

ARTICLES OF INCORPORATION

ARTICLE I

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: Market-Write, Inc.

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORID

ADTICLE II DDINGIDAL OFFICE
ARTICLE II PRINCIPAL OFFICE The principal place of business and mailing address of this corporation shall be:
1847 Ambleside Way Lake Worth, FC 33467
ARTICLE III SHARES The number of shares of stock that this corporation is authorized to have outstanding at any one time is:
<i>1,000</i>
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and Florida street address of the initial registered agent are: Michelle Brown Lake Worth, FC 33467
1847 Ambleside Way
ARTICLE V INCORPORATOR
The <u>name and address</u> of the incorporator to these Articles of Incorporation are: michelle Brown Lake Worth, R. 33467
michelle Brown Lake Worth, R 33467
7847 Amble side Way
Mechelle Beron 9/30/99
/ Signature/Imagementary

(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

Date