TRANSMITTAL LETTER

P99000100561

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

99 NOV 15 AH 9: 27
SECKETARY OF STATE
TARLAHASSEE FLORID

SUBJECT:

IMPULSE

SALES, INC.

(Proposed corporate name - must include suffix)

300003044736--5 -11/15/99--01133--011 ******87.50 ******87.50

Enclosed is an	origina	ıl and	one(1)	юру	of the article	s of inco	rporation a	nd a	check :	for :
	•									

\$70.00

□ \$78.75

Filing Fee Filing Fee

& Certificate of Status

\$78.75

,

\$87.50

Filing Fee

Filing Fee,

& Certified Copy

Certified Copy

& Certificate of

Status

ADDITIONAL COPY REQUIRED

FROM:

C. KRIGEL

Name (Printed or typed)

10619 W. ATLANTIC BLVD. # 127

Address

CORAL SPRINGS, FL 33071

City, State & Zip

954-956-7783

Daytime Telephone number

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

The name of the corporation shall be:

IMPULSE SALES, INC.

PRINCIPAL OFFICE ARTICLE II

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

10619 W. Atlantic Blvd. # 127 Coral Springs, FL 33071

SHARES ARTICLE III

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

500

INITIAL REGISTERED AGENT AND STRE

The name and Florida street address of the initial registered agent are:

C. Krigel

10619 W. Atlantic Blvd. # 127

Coral Springs, FL 33071

INCORPORATOR ... ARTICLE V

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

C. Krigel

10619 W. Atlantic Blvd. # 127

Coral Springs, FL 33071

(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