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(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
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TRANSMITTAL LETTER

Department of S	tate				
Division of Corp			and the second s		
P.O. Box 6327					
Tallahassee, FL	32314				
OLID MICH		Paradam 4 Wilmaha	- Tu		
SUBJECT:	PROPOSED CO	Freedom 4 Wireless, Inc. OPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)			
	PROPOSED CO	RPORATE NAME – <u>MOST M</u>	CLUDE SUFFIX)		
Enclosed are an orig	ginal and one (1) copy of	the articles of incorporation	on and a check for:		
				•	
X \$70.00	. 78.75	\$78.75	587.50		
Filing Fee	Filing Fee	Filing Fee	Filing Fee,		
_	& Certificate	& Certified Copy	Certified Copy		
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		ADDITIONAL	Status		
		ADDITIONAL	COPY REQUIRED		
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JAT)1V1:	Freedom 4 Wireless, I Name (Printed or typed)	<u> </u>	 · · ·	
		The second secon			
		14 East Washington	Q+		
		Address	24	<u> </u>	
		Orlando, FL 33418			
		City, State & Zip	<u> </u>		
		•			
		407-804-1020			
	Ţ	Daytime Telephone number	A SPECIAL SPEC	<u></u>	

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:

Freedom 4 Wireless, Inc.

ARTICLE II PRINCIPAL OFFICE

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

14 East Washington St, Suite 306 Orlando, FL 32801

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any and all lawful business.

ARTICLE IV SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 100,000,000 shares \$.0001 par value per share

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Title: CHDC
Robert Shaw
14 East Washington St, Suite 306
Orlando, FL 32801

Title: DP Harry M. Timmons 14 East Washington St, Suite 306 Orlando, FL 32801

Title: COOD
James K. Money
14 East Washington St, Suite 306
Orlando, FL 32801

Title: CTO
David Hickman
14 East Washington St, Suite 306
Orlando, FL 32801

Title: D Charles Sperry 14 East Washington St, Suite 306 Orlando, FL 32801

Title: D
John Thompson
14 East Washington St, Suite 306
Orlando, FL 32801

OS JAN 25 PH 4: 06
SECKETARY 4: STATE

REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Harry M. Timmons 14 East Washington St, Suite 306 Orlando, FL 32801

ARTICLE V **INCORPORATOR**

The name and address of the Incorporator is:

Harry M. Timmons 14 East Washington St, Suite 306 Orlando, FL 32801

President

(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 am familiar with and accept the appointment as registered agent and agree to act in this capacity.

ignature/Registered Agent

Signature/Incorporator