

N12000005664

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

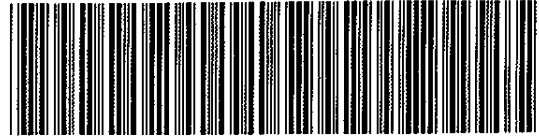
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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12 JUN - 6 PM 3:27  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

FILED  
12 JUN - 6 PM 2:47  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Ps 6/6/12

**COVER LETTER**

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

**SUBJECT:** Rivertown Broadband, Incorporated  
**(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)**

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

\$70.00  
Filing Fee

\$78.75  
Filing Fee &  
Certificate of  
Status

\$78.75  
Filing Fee  
& Certified Copy

\$87.50  
Filing Fee,  
Certified Copy  
& Certificate

**ADDITIONAL COPY REQUIRED**

**FROM:** Patrick Bell  
Name (Printed or typed)

5419 Appledore Lane  
Address

Tallahassee, FL 32309  
City, State & Zip

(850) 544-0784  
Telephone number

pbell@capitalsolutions.biz  
E-mail address: (to be used for future annual report notification)

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

**ARTICLES OF INCORPORATION**  
In compliance with Chapter 617, F.S., (Not for Profit)

**ARTICLE I NAME**

The name of the corporation shall be: **Rivertown Broadband, Incorporated**

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
**5419 Appledore Lane**  
**Tallahassee, FL**  
**32309**

Mailing address, if different is:  
**PO Box 10242**  
**Tallahassee, FL**  
**32301**

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Provide the citizens of the City of Blountstown and the surrounding areas with broadband internet.

**ARTICLE IV MANNER OF ELECTION** The manner in which the directors are elected and appointed:  
The directors will be elected by majority vote of the board.

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
_____	_____
Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
_____	_____
Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
_____	_____

**ARTICLE VI REGISTERED AGENT**

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

Name: **Patrick Bell**  
Address: **5419 Appledore Lane**  
**Tallahassee, FL**  
**32309**

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**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: **Josh Phares**  
Address: **415 Saint Francis Street #131**  
**Tallahassee, FL**  
**32301**

Having been named as registered agent 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

  
\_\_\_\_\_  
Required Signature of Registered Agent

6/6/12  
Date

I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

  
\_\_\_\_\_  
Required Signature of Incorporator

6/6/12  
Date