

N15000006612

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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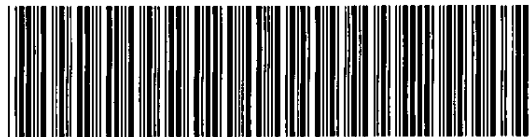
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
2015 JUL -6 AM 11:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JUL -9 2015

COVER LETTER

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

SUBJECT: THUMBNET INC

(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: James W. VanLandingham

Name (Printed or typed)

153 Whisper Ridge Drive

Address

St Augustine, FL, 32092

City, State & Zip

904-392-1938

Daytime Telephone number

wade@thumbsat.com

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: THUMBNET INC

ARTICLE II PRINCIPAL OFFICE

Principal street address:
153 Whisper Ridge Drive

St Augustine, FL, 32092

Mailing address, if different is _____

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ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ThumbNet^{Inc} will provide information, guidance, software and hardware to
schools, individuals and educational groups around the globe to increase awareness of Science, Technology, Engineering,
Mathematics, Radio, Physics and Space Technology, to inspire the next generation of scientists and engineers for the benefit of all
society. Upon dissolution of the Corporation, assets shall be distributed for one or more exempt purposes within the meaning of
Section 501(c)(3) of the Internal Revenue Code or the corresponding section of any future Federal Tax Code, or shall be distributed
to a qualified educational group for a public purpose.

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed: Majority vote

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Steven W. Diaz, President

Address: 153 Whisper Ridge Drive
St Augustine, FL, 32092

Name and Title: Daniel J. Sency, Vice President

Address: 153 Whisper Ridge Drive
St Augustine, FL, 32092

Name and Title: Cheryl A. VanLandingham, Secretary

Address: 153 Whisper Ridge Drive
St Augustine, FL, 32092

Name and Title: James W. VanLandingham, Treasurer

Address: 153 Whisper Ridge Drive
St Augustine, FL, 32092

Name and Title: John K. McGuire, Board Member

Address: 153 Whisper Ridge Drive
St Augustine, FL, 32092

Name and Title: _____

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: James W VanLandingham
Address: 153 Whisper Ridge Drive
St Augustine, FL, 32092

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: James W VanLandingham
Address: 153 Whisper Ridge Dr
St Augustine, FL, 32092

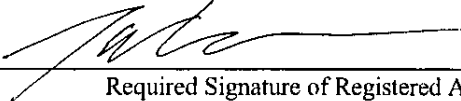
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

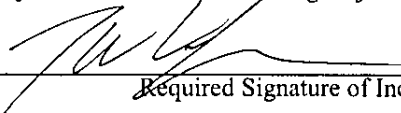
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Required Signature of Registered Agent

July 3, 2015
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

July 3, 2015
Date