

TRANSMITTAL LETTER

P010000 65304

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

SUBJECT: TermNet Merchant Services of Florida, Inc.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

800004450369--7  
-06/28/01--01096--012  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

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 of  
Status  
ADDITIONAL COPY REQUIRED

FROM: Joe Londot  
Name (Printed or typed)  
6091 Johns Rd. Suite 4  
Address  
Tampa, FL 33634  
City, State & Zip  
813 249-6818  
Daytime Telephone number

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

01 JUN 28 AM 1:00

FILED

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

JUL 2 2001

# ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

## ARTICLE I NAME

The name of the corporation shall be:

TermNet Merchant Services of Florida, Inc.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

6091 Johns Road  
Suite 4  
Tampa, FL 33634

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Profit Corporation

## ARTICLE IV SHARES

The number of shares of stock is:

1000

## ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

Herry J. Londot  
6610 Seefairer Dr.  
Tampa, FL 33615

Dennis R. Rogero  
3124 Buckview Ln.  
Brandon, FL 33511

## ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

Herry J. Londot  
6610 Seefairer Dr.  
Tampa, FL 33615

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Herry J. Londot  
6610 Seefairer Dr.  
Tampa, FL 33615

\*\*\*\*\*  
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

\_\_\_\_\_  
Signature/Registered Agent

\_\_\_\_\_  
Date

6/13/01

\_\_\_\_\_  
Signature/Incorporator

\_\_\_\_\_  
Date

6/13/01

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TALLAHASSEE, FLORIDA