# P03000039818

| (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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|   |  |  |  |  |
| Special Instructions to Filing Officer: |  |  |  |  |

Office Use Only



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SECHLIARY OF STATE
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## TRANSMITTAL LETTER

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| Department of State  |                                    |                            |                         |
|----------------------|------------------------------------|----------------------------|-------------------------|
| Division of Corpora  | tions — 850-487-6052<br>845        | 활                          |                         |
| P. O. Box 6327       |                                    |                            |                         |
| Tallahassee, FL 323  | 314                                |                            |                         |
|                      |                                    |                            |                         |
|                      |                                    |                            |                         |
| SUBJECT: WE          | B INNOVATIONS, INC.                |                            |                         |
|                      | (PROPOSED CORPORA'                 | ΓΕ NAME – <u>MUST INCL</u> | UDE SUFFIX)             |
|                      |                                    |                            |                         |
|                      |                                    |                            |                         |
|                      |                                    |                            |                         |
| Enclosed are an orig | ginal and one (1) copy of the arti | cles of incorporation and  | l a check for:          |
|                      |                                    |                            |                         |
| \$70.00              |                                    | <b>□</b> \$78.75           | <b>□</b> \$87.50        |
| Filing Fee           | Filing Fee                         | Filing Fee                 | Filing Fee,             |
|                      | & Certificate of Status            | & Certified Copy           | Certified Copy          |
|                      |                                    |                            | & Certificate of Status |
|                      |                                    | ADDITIONAL CO              |                         |
|                      |                                    | ADDITION NEED CO           | - Traceonary            |
|                      | Scott Gilliland                    |                            |                         |
| FROM:                | Name (Printed or typed)            |                            |                         |
|                      |                                    | (c. ramon or Oppon)        |                         |
|                      | 316 Stokes Creek Drive             |                            |                         |
|                      | Address                            |                            |                         |
|                      |                                    |                            |                         |
| -<br>-               | Saint Augustine, FL 32095          |                            |                         |
|                      | City, State & Zip                  |                            |                         |
|                      | 201 200 2100                       |                            |                         |
|                      | 904-829-0128                       |                            |                         |
|                      | Daytime To                         | elenhone number            |                         |

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

# 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:

Web Innovations, Inc.

#### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

316 Stokes Creek Drive St. Augustine, FL 32095

#### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Web Innovations, Inc. exists to provide Internet web site design, development, hosting, and business services.

#### ARTICLE IV SHARES

The number of shares of stock is:

10,000 shares Authorized with 100 shares issued. It is the Intent that these shares are issued as small Business shares as refferenced in IRC CODE 1244

#### ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

B. S. Gilliland, President

### ARTICLE VI REGISTERED AGENT

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

Scott Gilliland 316 Stokes Creek Drive St. Augustine, Florida 32095

#### 

The name and address of the Incorporator is:

Scott Gilliland 316 Stokes Creek Drive St. Augustine, FL 32095

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