

P03000062374

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

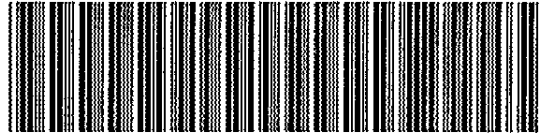
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
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F. GESSER

JUN 6

TRANSMITTAL LETTER

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

SUBJECT: BYTES COMPUTER NETWORKS INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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:

KEITH GITTENS

Name (Printed or typed)

5421 SW 14th St

Address

PLANTATION FL 32322

City, State & Zip

(954) 791 9440

Daytime Telephone 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:

BYTES COMPUTER NETWORKS INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

1876 N. UNIVERSITY DRIVE #3001
PLANTATION FL 33322

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

COMPUTER NETWORK SERVICES FOR PROFIT

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

KEITH GITTENS, PRESIDENT
SYBIL GITTENS, SECRETARY

ARTICLE VI REGISTERED AGENT

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

KEITH GITTENS
5421 SW 14TH ST
PLANTATION FL 33317

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

KEITH GITTENS
5421 SW 14TH ST
PLANTATION FL 33317

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

Signature/Incorporator

Date

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
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