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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
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## TRANSMITTAL LETTER

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

**SUBJECT:** The National Adoption Agency Fraud Alert System 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:** John T Spoor

Name (Printed or typed)

284 Katherine Bv #8310

Address

Palm Harbor Florida 34684

City, State & Zip

727-422-1649

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:

The National Adoption Agency Fraud Alert System Inc.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

284 Katherine Bv. #8310  
Palm Harbor, FL 34684

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

A Network System for Adoption Agencies

### ARTICLE IV SHARES

The number of shares of stock is:

7500

### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

John T Spoor 284 Katherine Bv #8310 Palm Harbor FL 34684 President/Vice President/Secretary

### ARTICLE VI REGISTERED AGENT

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

John T Spoor 284 Katherine BV #8310 Palm Harbor FL 34684

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

John T Spoor 284 Katherine BV #8310 Palm Harbor FL 34684

\*\*\*\*\*

*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

1-27-04  
\_\_\_\_\_  
Date

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

1-27-04  
\_\_\_\_\_  
Date

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