

P04000094568

(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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2004 JUN 21 P 2:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

TRANSMITTAL LETTER

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

SUBJECT: Living Archive, Corporation

(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: Benjamin P. Greene

Name (Printed or typed)

602 Lemonwood Dr.

Address

Oldsmar, Florida 34677

City, State & Zip

813-854-3767

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:

Living Archive, Corporation

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

Sonictrax
2263 University Square Mall
Tampa, Florida 33612

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Transacting any lawful business

ARTICLE IV SHARES

The number of shares of stock is:

100 SHARES

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Benjamin P. Greene
602 Lemonwood Dr.
Oldsmar, Florida 34677
President

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Benjamin P. Greene
602 Lemonwood Dr.
Oldsmar, Florida 34677

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Benjamin P. Greene
602 Lemonwood Dr.
Oldsmar, Florida 34677

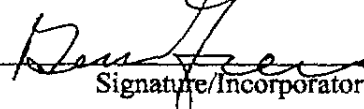
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

6-16-04

Date



Signature/Incorporator

6-16-04

Date

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TALLAHASSEE, FLORIDA