

P04000128895

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

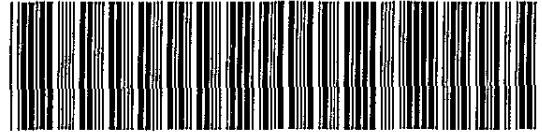
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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04 SEP 13 AM 11:15  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

9-13-04

## TRANSMITTAL LETTER

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

SUBJECT: NETWORK MARKETING TECHNOLOGY 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      ☐ \$78.75  
Filing Fee      Filing Fee  
                         & Certificate of Status

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input checked="" type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
<b>ADDITIONAL COPY REQUIRED</b>	

FROM: KEVIN L. SIPE  
Name (Printed or typed)

205 WEST VENICE AVE  
Address

VENICE FL 34284  
City, State & Zip

941-480-0133  
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)

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TALLAHASSEE, FLORIDA

**ARTICLE I NAME**

The name of the corporation shall be:

NETWORK MARKETING TECHNOLOGY CORPORATION

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

205 WEST VENICE AVE, VENICE, FL 34284

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

SOFTWARE

**ARTICLE IV SHARES**

The number of shares of stock is:

10,000

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

KEVIN L. SIPE - PRESIDENT  
ANNA M. WATSON - SECRETARY OF TREASURER

**ARTICLE VI REGISTERED AGENT**

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

KEVIN L. SIPE  
205 WEST VENICE AVE  
VENICE, FL  
34284

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

KEVIN L. SIPE  
205 WEST VENICE AVE  
VENICE, FL  
34284

\*\*\*\*\*  
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

9-9-09  
Date

  
Signature/Incorporator

9-9-09  
Date