

FB4000134592

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

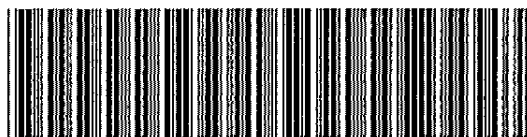
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

9-27-04
WC

TRANSMITTAL LETTER

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

SUBJECT: REMOTE ATTENDED INTERNATIONAL, 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: KENTON W. NOAKES
Name (Printed or typed)

1790 LAGO VISTA BLVD.
Address

PALM HARBOR, FL 34685
City, State & Zip

727 781-7430
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:

REMOTE ATTENDED INTERNATIONAL, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

1790 LAGO VISTA BLVD.
PALM HARBOR, FL 34685

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

PROFESSIONAL CORPORATION

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):

KENTON W. NOAKES 1790 LAGO VISTA BLVD. PALM HARBOR, FL 34685

ARTICLE VI REGISTERED AGENT

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

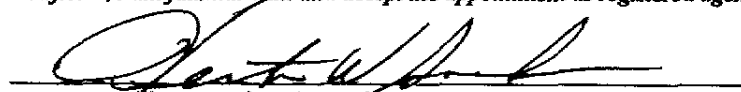
KENTON W. NOAKES 1790 LAGO VISTA BLVD. PALM HARBOR, FL 34685

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

KENTON W. NOAKES 1790 LAGO VISTA BLVD. PALM HARBOR, FL 34685

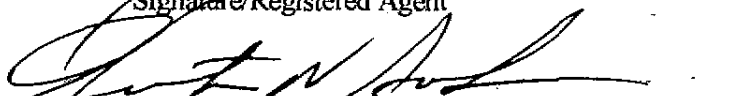
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

09/24/2004

Date



Signature/Incorporator

09/24/2004

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA