P04000153137

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Office Use Only



500042346835

11/04/04--01011--006 **87.50

FILED

O4 NOV -4 PH 12: 15

SECRETARY OF STATE

SECRETARY OF STATE

- 119/04 SH

TRANSMITTAL LETTER

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

SUBJECT:	UnuTAG	E BOTTOM LINE INC. CORPORATE NAME - MUST INCLUDE SUFFIX)
	(PROPOSED	O CORPORATE NAME – <u>MUST INCLUDE SUFFIX</u>)
Enclosed are an orig	inal and one (1) cor	py of the articles of incorporation and a check for:
\$70.00	\$78.75	\$78.75
Filing Fee	Filing Fee	Filing Fee Filing Fee,
rining i cc	& Certificate of	1
	oc cerminate of	& Certificate of
		Status
		ADDITIONAL COPY REQUIRED
	2	
FROM:	KeBe	Name (Printed or typed)
	υ'	Name (Printed or typed)
	0.4-	0 1 1 1 1 F.
	2/2 N	Eme Circle N.E.
· · · · · · · · · · · · · · · · · · ·		Address
	PALMI	BAY (= 2 3290) City, State & Zip
		/ City, State & Zip
	307	1 400-261
	32/-	1 480 - 260/ Daytime Telephone number
		Dayanic reignione 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 The name of the corporation shall be: ADVANTAGE BOTTOM LINE, INC. ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 212 NEMO CIRCLE N.E. The purpose for which the corporation is organized is: CONSULTING GERVICES ARTICLE IV The number of shares of stock is: 100 ARTICLE V INITIAL OFFICER'S AND/OR DIRECTORS List name(s), address(es) and specific title(s): POBERT I BORZA THEARSA A BOZZA SECRETARY PU, 212 Nomo CIRCLE Polon Bay, PC ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: The name and address of the Incorporator is: 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