

P060000/06296

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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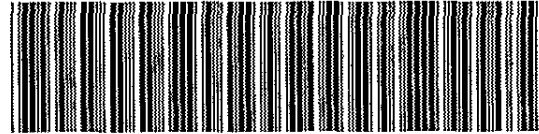
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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06 AUG 14 PM 1:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MRS
8/15

COVER LETTER

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

SUBJECT: NetBiz Technologies, 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: Juan M. Roncal

Name (Printed or typed)

472 Bridle Path Way

Address

Tarpon Springs, FL 34688

City, State & Zip

727-943-2812

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:

NetBiz Technologies, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

472 Bridle Path Way
Tarpon Springs, FL 34688

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Professional Information Systems Services

ARTICLE IV SHARES

The number of shares of stock is:

One Hundred

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Juan M. Roncal - President
472 Bridle Path Way
Tarpon Springs, FL 34688

ARTICLE VI REGISTERED AGENT

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


Juan M. Roncal
472 Bridle Path Way
Tarpon Springs, FL 34688

ARTICLE VII INCORPORATOR


The name and address of the Incorporator is:

Juan M. Roncal
472 Bridle Path Way
Tarpon Springs, FL 34688

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



Signature/Incorporator

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

8-9-2006

Date

8-9-2006

Date