

P06000143243

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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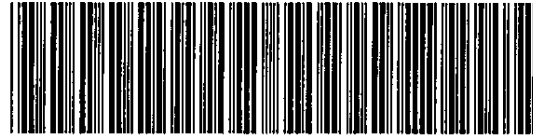
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**COVER LETTER**

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

**SUBJECT:** ListenerWare Systems, 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:** Ross W. Smith

Name (Printed or typed)

P O Box 1355

Address

Gulf Breeze FL 32562

City, State & Zip

850-934-7300

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:

ListenerWare Systems, Inc.

## **ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

1163 Gulf Breeze Pkwy

Gulf Breeze FL 32561

## **ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Software Technology Development

## **ARTICLE IV SHARES**

The number of shares of stock is:

100,000

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

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

## **ARTICLE VI REGISTERED AGENT**

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

Ross W. Smith

420 Oakleaf Ct

Pensacola FL 32514

## **ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:


Ross W. Smith

1163 Gulf Breeze Pkwy


Gulf Breeze FL 32561

\*\*\*\*\*

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 / Incorporator

  
Date

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA