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2008 MAR 10 P 2:55  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

3-11-08

**COVER LETTER**

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

SUBJECT: Empowered Network, 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: Joann Frazier  
Name (Printed or typed)

6799 Carmelle Dr  
Address

Ft Myers FL 33919  
City, State & Zip

239) 233-4114  
Daytime Telephone number

**NOTE: Please provide the original and one copy of the articles.**

**ARTICLES OF INCORPORATION**

**ARTICLE I NAME**

The name of the corporation shall be: Empowered Network, Inc

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is: 6799 Carmelle Drive  
Fort Myers FL 33919

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Women's  
Networking organization.

**ARTICLE IV SHARES**

The number of shares of stock is:

**ARTICLE V INITIAL OFFICERS/DIRECTORS**

Joann Frazier - *1 share* President  
6799 Carmelle Drive  
Fort Myers FL 33919

**ARTICLE VI REGISTERED AGENT**

Joann Frazier  
6799 Carmelle Drive  
Fort Myers FL 33919

**ARTICLE VII INCORPORATOR**

Joann Frazier  
6799 Carmelle Drive  
Fort Myers FL 33919

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.

  
Registered Agent & Incorporator

*3-5-08.*  
Date

**FILED**  
2008 MAR 10 P 2:56  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA