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(Business Entity Name)

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Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Joni Byrd

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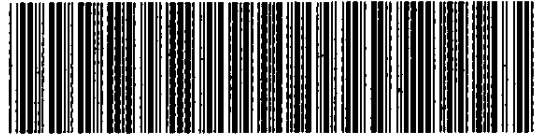
AUTHORIZATION BY PHONE TO

CORRECT *Add sluc. on corporate name*

DATE *3/16/10*

DOC. EXAM *MRS*

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03/15/10--01048--027 **128.75

FILED
10 MAR 15 PM 12:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MRS
3/16

COVER LETTER

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

SUBJECT: newlocaldirect.com, Inc.

Enclosed is an original and one (1) copy of the Certificate of Domestication and a check for:

FEES:

Certificate of Domestication	\$ 50.00
Articles of Incorporation and Certified Copy	\$ 78.75
Total to domesticate and file	\$128.75

OPTIONAL:

Certificate of Status \$ 8.75

newlocaldirect.com, INC.
Name (printed or typed)

P.O. Box 36804
Address

Panama City, FL 32412
City, State & Zip

317-417-2468
Daytime Telephone Number

joni @ newlocaldirect.com
E-mail address: (to be used for future annual report notification)

CERTIFICATE OF DOMESTICATION

The undersigned, William W. Byrd, President,
(Name) (Title)

of newlocaldirect.com a foreign corporation,
(Corporation Name)

in accordance with s. 607.1801, Florida Statutes, does hereby certify:

1. The date on which corporation was first formed was August 31, 2005.
2. The jurisdiction where the above named corporation was first formed, incorporated, or otherwise came into being was state of Indiana.
3. The name of the corporation immediately prior to the filing of this Certificate of Domestication was newlocaldirect.com.
4. The name of the corporation, as set forth in its articles of incorporation, to be filed pursuant to s. 607.0202 and 607.0401 with this certificate is newlocaldirect.com, Inc.
5. The jurisdiction that constituted the seat, siege social, or principal place of business or central administration of the corporation, or any other equivalent jurisdiction under applicable law, immediately before the filing of the Certificate of Domestication was state of Indiana.
6. Attached are Florida articles of incorporation to complete the domestication requirements pursuant to s. 607.1801.

I am William W. Byrd, of newlocaldirect.com

and am authorized to sign this Certificate of Domestication on behalf of the corporation and have done so this the 11 day of March, 2010.

William W. Byrd
(Authorized Signature)

Filing Fee:	
Certificate of Domestication	\$ 50.00
Articles of Incorporation and Certified Copy	\$ 78.75
Total to domesticate and file	\$128.75

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION
IN COMPLIANCE WITH CHAPTER 607, F.S.

FILED

10 MAR 15 PM 12:33

ARTICLE I NAME

THE NAME OF THE CORPORATION SHALL BE:

newlocaldirect.com, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS/MAILING ADDRESS IS:

Mailing: P.O. Box 36804
Panama City, FL 32412

Principal Place of Business:
4427 Tropical Drive
Panama City, FL 32404

ARTICLE III PURPOSE

THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED: To develop and create advertising sales software for clients in media business.

ARTICLE IV SHARES

THE NUMBER OF SHARES OF STOCK IS:

10,000 shares

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

THE NAME(S) AND ADDRESS(ES) AND SPECIFIC TITLES:

William W. Byrd, President
P.O. Box 36804
Panama City, FL 32412

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

THE **NAME AND FLORIDA STREET ADDRESS** (P.O. BOX NOT ACCEPTABLE) OF THE REGISTERED AGENT IS:

William H. Byrd
4427 Tropical Drive, Panama City, FL 32404

ARTICLE VII INCORPORATOR

THE **NAME AND ADDRESS** OF THE INCORPORATOR IS:

Joni S. Byrd
P.O. Box 36804
Panama City, FL 32412

HAVING BEEN NAMED AS REGISTERED AGENT AND 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.

William H Byrd
Signature/Registered Agent

3/11/10
Date

Joni S. Byrd
Signature/Incorporator

3/11/10
Date