

P10000086219

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

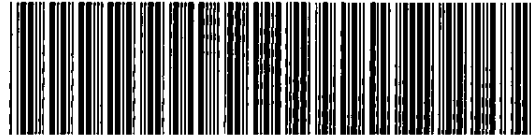
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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OCT 20 PM 2:49  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

7:50am OCT 21 2010

## COVER LETTER

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

**SUBJECT: Quality Business 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: JAMES JACOBS

Name (Printed or typed)

7220 WOODBROOK DRIVE

Address

TAMPA, FL 33625

City, State & Zip

813-288-8123

Daytime Telephone number

J.JACOBS@EMPIRELIGHTINGRESOURCES.COM

E-mail address: (to be used for future annual report notification)

**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: **QUALITY BUSINESS NETWORK, INC.**

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
**15105 MEADOWLAKE STREET**  
**ODESSA, FLORIDA 33556**

Mailing address, if different is:

**P.O. BOX 496**  
**OLDSMAR, FL 34677**

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:  
**Business Networking Group**

**ARTICLE IV SHARES**

The number of shares of stock is: **100**

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

Name and Title: **James Jacobs, President**  
Address: **7220 Woodbrook Drive**  
**Tampa, FL 33625**

Name and Title: **Kelly Watson, Vice President**  
Address: **13911 Carrollwood Village Run**  
**Tampa, FL 33618**

Name and Title: **Vincent Erb, Secretary**  
Address: **101 Holley Tree Lane**  
**Brandon, FL 33511**

Name and Title: **James L. Cook, Treasurer**  
Address: **15105 Meadowlake Street**  
**Odessa, FL 33556**

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

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

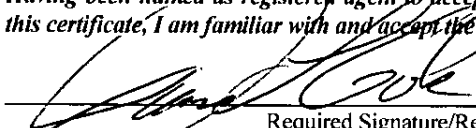
Name: **James L. Cook**  
Address: **15105 Meadowlake Street**  
**Odessa, FL 33556**

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

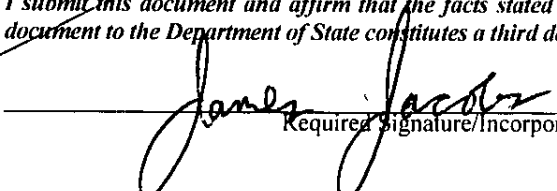
Name: **Linda S. Faingold**  
Address: **5326 Van Dyke Road**  
**Lutz, FL 33558**

*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*

  
Required Signature/Registered Agent

**10-15-10**  
Date

*I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.*

  
Required Signature/Incorporator

**10/15/2010**  
Date

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