

P/3XXX092631

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

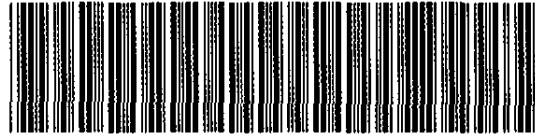
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status ☒

Special Instructions to Filing Officer:

Office Use Only



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11/15/13--01001--015 **78.75

RECEIVED
DEPARTMENT OF STATE
13 NOV 14 PM 3:31

13 NOV 14 PM 3:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

[Handwritten signature]
11/14/13

COVER LETTER

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

SUBJECT: Site Mark Software Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

~~\$78.00~~
~~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: Dennis M. Lang
Name (Printed or typed)

P.O. Box 15161
Address

Tallahassee, FL 32317
City, State/ & Zip

251-510-8372
Daytime Telephone number

SCREAMINGEAGLE6158@gmail.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: Site Mark Software INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

2000 N. Meridian Rd #312
Tallahassee, FL 32303

Mailing address, if different is:

P.O. Box 15161
Tallahassee, FL 32317

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: software development.

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SECRET
TALLAHASSEE FL 32303

APPROVAL
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ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: ~~Dennis M. Lang~~ Name and Title: _____

Address: ~~2000 N. Meridian Rd~~ Address: _____

~~#312~~
~~Tallahassee, FL 32303~~

Name and Title: Dennis M. Lang (P) Name and Title: Darla Bryant (VP)

Address: P.O. Box 15161 Address: P.O. Box 15161

Tallahassee, FL
32317 Tallahassee, FL
32317

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

(conti.)

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

ARTICLE VI REGISTERED AGENT

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

Name:

DENNIS M. LANG

Address:

2000 N. MERIDIAN Rd #312
Tallahassee, FL 32303

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name:

DENNIS M. LANG

Address:

P.O. Box 15161
Tallahassee, FL 32317

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

11-14-13
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

11-14-13
Date