

PA00009705A

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

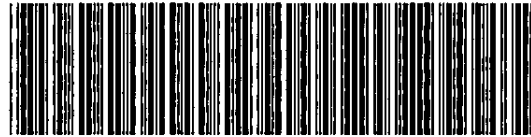
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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2014

COVER LETTER

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

SUBJECT: Total Network Marketing 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: Americo Armando Bruno

Name (Printed or typed)

5200 N Ocean Blvd, Apt 1608

Address

Lauderdale By The Sea, FL 33308

City, State & Zip

954-260-9000

Daytime Telephone number

americobruno@hotmail.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: Total Network Marketing, Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

5200 N Ocean Blvd, Apt 1608

Lauderdale By The Sea

FL - 33308

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To market training materials, products in general and services.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Americo Armando Bruno Name and Title: _____

Address Chief Executive Officer - CEO Address: _____

5200 NOCEAN BLVD, APT 1608
LAUDERDALE BY THE SEA, FL 33308

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

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(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: Americo Armando Bruno

Address: 5200 N Ocean Blvd, Apt 1608

Lauderdale By The Sea - FL 33308

ARTICLE VII INCORPORATOR

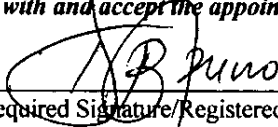
The name and address of the Incorporator is:

Name: Americo Armando Bruno

Address: 5200 N Ocean Blvd, Apt 1608

Lauderdale By The Sea - FL 33308

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

12/01/2014

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

12/01/2014

Date

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