

P20000041131

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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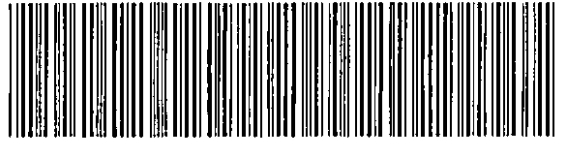
(Business Entity Name)

(Document Number)

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N. CULLIGAN

JUN -8 2020

**CORPORATE
ACCESS,
INC.***When you need ACCESS to the world*

236 East 6th Avenue, Tallahassee, Florida 32303
P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

WALK IN**PICK UP:** 06/05/2020**xx** **CERTIFIED COPY** _____☐ **PHOTOCOPY** _____☐ **CUS** _____**xx** **FILING** INC _____**1. MARKETWORKS GLOBAL INC** _____

(CORPORATE NAME AND DOCUMENT #)

2. _____
(CORPORATE NAME AND DOCUMENT #)**3.** _____
(CORPORATE NAME AND DOCUMENT #)**4.** _____
(CORPORATE NAME AND DOCUMENT #)**5.** _____
(CORPORATE NAME AND DOCUMENT #)**6.** _____
(CORPORATE NAME AND DOCUMENT #)**SPECIAL
INSTRUCTIONS:**

ARTICLES OF INCORPORATION FOR FLORIDA PROFIT BENEFIT CORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

Marketworks Global Inc

The name of the benefit corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

4830 WEST KENNEDY BLVD, SUITE 600

Tampa, FL 33609

ARTICLE III BENEFIT STATEMENT AND BUSINESS PURPOSE

The corporation elects to be a benefit corporation in accordance with s. 607.603, F.S.

The purpose for which the corporation is organized is to create a general public benefit and:

to work with small to medium sized businesses to help them create social impact with their business

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The general and/or specific public benefit(s) to be created by the corporation (in addition to its general purpose) is/are as follows (optional):

ARTICLE IV SHARES

1,000,000

The number of shares of stock is:

ARTICLE V INITIAL OFFICERS, DIRECTORS, BENEFIT DIRECTOR AND BENEFIT OFFICER (if Applicable)

Name and Title: Sarah Adomakoh, Director

Name and Title: Sarah Adomakoh, President

Address 1 Manor Court, Mill Lane

Address: 1 Manor Court, Mill Lane

North Chailey B8 4EG

North Chailey B8 4EG

Great Britain

Great Britain

Name and Title: Simonne Tiley, Secretary

Name and Title: Simonne Tiley, Treasurer

Address Landfall Lodge, Sandhill Lane

Address: Landfall Lodge, Sandhill Lane

Crawley Down RH10 4IE

Crawley Down RH10 4IE

Great Britain

Great Britain

Name and Title: _____ Name and Title: _____
Address _____ Address: _____

If applicable, BENEFIT DIRECTOR: Sarah Adomakoh
Name: _____ Name: _____
Address 1 Manor Court, Mill Lane
North Chailey B8 4EG
Great Britain

If applicable, BENEFIT OFFICER:
Name: _____
Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Legalinc Corporate Services Inc.
Address: 5237 Summerlin Commons, Suite 400
Fort Myers, FL 33907

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ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Carri Brown
Address: 26025 Mureau Rd. Suite 120
Calabasas, CA 91302

ARTICLE VIII ADDITIONAL QUALIFICATIONS OF BENEFIT DIRECTOR, IF ANY:

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

Dana Case

Required Signature/Registered Agent

05/11/2020

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.

[Signature]

Required Signature/Incorporator

05/11/2020

Date