

960000067120

CAPITAL CONNECTION, INC.

417 E. Virginia St., Suite 1, Tallahassee, FL 32301, (904)224-8870
Mailing Address: Post Office Box 10349, Tallahassee, FL 32302
TOLL FREE No. 1-800-342-8062
FAX (904) 222-1222

NAME _____
FIRM _____
ADDRESS _____
PHONE () _____

Service: Top Priority _____ Regular _____
One Day Service Two Day Service

To us via _____ Return via _____

Matter No.: _____ Express Mail No. _____

State Fee \$ _____ Our \$ _____

FILED
96 AUG 13 PM 12:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AL JUL 13 1996

REQUEST	TAKEN	CONFIRMED	APPROVED
DATE			
TIME			CK No. _____
BY	AAK		

WALK-IN Will Pick Up 8-13 DW

RE: www Pages, Inc.

	G.O. FEE.	DISBURSED
Capital Express™		
☒ Art. of Inc. File		
Corp. Record Search		
Ltd. Partnership File		
Foreign Corp. File		
☒ Cert. Copy(s)		
Art. of Amend. File		
Dissolution/Withdrawal		
C U S.		
Fictitious Name File		
Name Reservation		
Annual Report/Reinstatement		
Reg. Agent Service		
Document Filing		
Corporate Kit		
Vehicle Search		
Driving Record		
Document Retrieval		
UCC 1 or 3 File		
UCC 11 Search		
UCC 11 Retrieval		
File No.'s, Copies		
Courier Service		
Shipping/Handling		
Phone ()		
Top Priority		
Express Mail Prep.		
FAX () pgs.		

SUBTOTALS

FEE.....
DISBURSED.....
SURCHARGE.....
TAX on corporate supplies.....
SUBTOTAL.....
PREPAID.....
BALANCE DUE.....

Please remit invoice number with payment
TERMS: NET 10 DAYS FROM INVOICE DATE
1 1/2% per month on Past Due Amounts
Past 30 Days, 18% per Annum.

THANK YOU
from
Your Capital Connection

RECEIVED
96 AUG 13 AM 9:35
DIVISION OF CORPORATION

ARTICLES OF INCORPORATION
of
WWW PAGES, INC.

FILED
96 AUG 13 PM 12:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FIRST:

The name of the Corporation shall be WWW PAGES, INC. The principal mailing address of the corporation is 1605 Main Street, Suite 1001, Sarasota, Florida 34236.

SECOND:

The purposes for which the corporation is formed are any and all lawful purposes for which a corporation may be formed pursuant to the laws of the State of Florida and the United States.

THIRD:

The corporation shall be authorized and empowered to issue TEN THOUSAND (10,000) shares of common stock.

FOURTH:

The mailing address of the Registered Office of the Corporation is 1605 Main Street, Suite 1001, Sarasota, Florida 34236.

FIFTH:

The registered agent for the corporation shall be:

STANLEY A. GOLDSMITH
1605 Main Street, Suite 1001
Sarasota, Florida 34236

SIXTH:

To the incorporator of WWW PAGES, INC.:

I understand my obligations as your Registered Agent and hereby accept appointment as your Registered Agent in accordance with F.S. 48.091.

8/12/96
Date


Stanley A. Goldsmith

SEVENTH:

The initial Board of Directors of the corporation shall consist of one (1) member:

Albert L. Maslar, Jr.
159 Croop Lane
Port Charlotte, Florida 33952

EIGHTH:

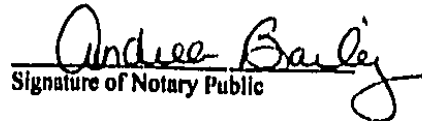
The incorporator of WWW PAGES, INC., who by his signature hereby acknowledges the adoption of these Articles of Incorporation, is:


STANLEY A. GOLDSMITH
1605 Main Street
Suite 1001
Sarasota, Florida 34236

FILED
96 AUG 13 PM 12:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

STATE OF FLORIDA)
COUNTY OF SARASOTA) ss:

The foregoing Articles of Incorporation of WWW PAGES, INC., were acknowledged before me this 12th day of August 1996, by STANLEY A. GOLDSMITH as registered agent. He is personally known to me or has produced N/A as identification and did not take an oath. If no type of identification is indicated, the above-named person is personally known to me.


Signature of Notary Public

Print Name of Notary Public

I am a Notary Public of the State of _____, and my commission expires on _____.



ANDREA BAILEY
My Commission CC298491
Expires Jul. 17, 1997
Bonded by ANS
800-852-5878

The foregoing Articles of Incorporation of WWW PAGES, INC., were acknowledged before me this 12th day of August 1996, by STANLEY A. GOLDSMITH, as incorporator. He is personally known to me or has produced N/A as identification and did not take an oath. If no type of identification is indicated, the above-named person is personally known to me.


Signature of Notary Public

Print Name of Notary Public

I am a Notary Public of the State of _____, and my commission expires on _____.



ANDREA BAILEY
My Commission CC298491
Expires Jul. 17, 1997
Bonded by ANS
800-852-5878