

P 99 000012466

TRANSMITTAL LETTER

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

200002765622--0

-02/05/99--01034--006

\*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT: Joseph D. Novak Knowledge Consultants, Inc.  
(Proposed corporate name - must include suffix) 0

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

☐ \$70.00  
Filing Fee

☒ \$78.75  
Filing Fee  
& Certificate

☐ \$122.50  
Filing Fee  
& Certified Copy

☐ \$131.25  
Filing Fee,  
Certified Copy  
& Certificate

Additional Copy Required

FILED  
99 FEB -5 AM 10:15  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FROM: Joseph D. Novak  
Name (printed or typed)

90 Highland Ave. So. Club III Unit 302  
Address

Tarpon Springs, FL 34689  
City, State & Zip

(727) 938-1823  
Daytime Telephone number

F. CHESSER FEB 9 1999

NOTE: Please provide the original and one copy of the articles.

## ARTICLES OF INCORPORATION

*The undersigned incorporators, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt the following articles of incorporation.*

### ARTICLE I NAME

The name of the corporation shall be Joseph D. Novak Knowledge Consultants, Incorporated.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business and the mailing address of this corporation shall be:

90 Highland Ave. So.

Club III, Unit 302

Tarpon springs, FL 34689

### ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 200

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Joseph D. Novak

90 Highland Ave. So.

Club III, Unit 302

Tarpon Springs, FL 34689

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ARTICLE V INCORPORATORS

The name and address of the incorporator is:

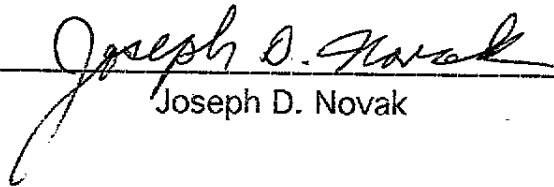
Joseph D. Novak

90 Highland Ave. So.

Club III, Unit 302

Tarpon Springs, FL 34689

The undersigned incorporator has executed these Articles of Incorporation  
this 3rd day of February, 1999

  
\_\_\_\_\_  
Joseph D. Novak

# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

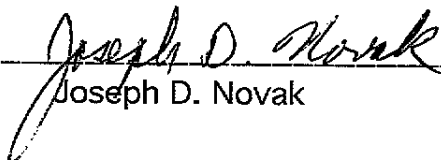
PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. THE NAME OF THE CORPORATION IS: JOSEPH D. NOVAK KNOWLEDGE CONSULTANTS, INC.
2. THE NAME AND ADDRESS OF THE REGISTERED AGENT OFFICE IS:

JOSEPH D. NOVAK  
90 HIGHLAND AVE. SO.  
CLUB III, UNIT 302  
TARPON SPRINGS, FL 34689

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*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and am familiar with and accept obligations of my position as registered agent.*

  
\_\_\_\_\_  
Joseph D. Novak

Date: Feb 3, 1999