

TRANSMITTAL LETTER
P99000084526

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

SUBJECT: INTERNET PROGRAMMING CORP.

(Proposed corporate name - must include suffix)

300002993623-1
09/22/99-01053-001
*****78.75 *****78.75

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 of Status

☐ \$78.75 Filing Fee
& Certified Copy
☐ \$87.50 Filing Fee,
Certified Copy
& Certificate of
Status
ADDITIONAL COPY REQUIRED

FROM: Anthony LaPorte
Name (Printed or typed)
36243 US19 North, PMB-101
Address
Palm Harbor, FL 34684
City, State & Zip
727-934-4245
Daytime Telephone number

FILED
99 SEP 22 AM 7:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

T BROWN SEP 24 1999

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

INTERNET PROGRAMMING CORP.

ARTICLE II PRINCIPAL OFFICE

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

36243 US19 North, PMB-101
Palm Harbor, FL 34684

ARTICLE III SHARES

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

100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Anthony LaPorte
36243 US19 North, PMB-101
Palm Harbor, FL 34684

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Anthony LaPorte
36243 US19 North, PMB-101
Palm Harbor, FL 34684


Signature/Incorporator

9-20-99
Date

(An additional article must be added if an effective date is requested.)

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 I am familiar with and accept the obligations of my position as registered agent


Signature/Registered Agent

9-20-99
Date

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TALLAHASSEE, FLORIDA