

TRANSMITTAL LETTER

P99000091833

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

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-10/14/99--01056--015
*****78.75 *****78.75

SUBJECT: MONEYTREE Network Inc.
(Proposed corporate name - must include suffix)

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: Joseph Ciliento
Name (Printed or typed)

19451 Gulf Blvd #602
Address

INDIAN Shores FL 33785
City, State & Zip

(727) 596 0117
Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE FLORIDA

99 OCT 14 PM 4:53

FILED

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

S. Thompson OCT 19 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:

MONEYTREE Network INC.

ARTICLE II PRINCIPAL OFFICE

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

19451 Gulf Blvd. #602 INDIAN SHORES FL. 33785

ARTICLE III SHARES

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

ONE HUNDRED

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Joseph Ciliento 19451 Gulf Blvd #602 INDIAN SHORES FL. 33785

ARTICLE V INCORPORATOR

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

Joseph Ciliento 19451 Gulf Blvd #602 INDIAN SHORES FL. 33785

Joseph Ciliento
Signature/Incorporator

10/12/99
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

Joseph Ciliento
Signature/Registered Agent

10/12/99
Date

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TALLAHASSEE, FLORIDA