

TRANSMITTAL LETTER

P 99000097307

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

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-11/03/99--01043--012
*****78.75 *****78.75

SUBJECT:

Internet Innovations, 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 Sabella
Name (Printed or typed)

4209 SW 15th Ave
Address

Cape Coral, FL 33914
City, State & Zip

(941) 540-2361 or (941) 218-6400
Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

99 NOV -3 PM 1:09

FILED

NOV 4 1999

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

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 Innovations Inc.

ARTICLE II PRINCIPAL OFFICE

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

4209 SW 15th Ave
Cape Coral, FL 33914

ARTICLE III SHARES

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

10,000 Shares.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

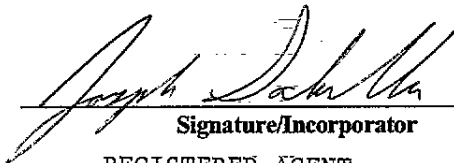
The name and Florida street address of the initial registered agent are:

Joseph Sabella 4209 SW 15th Ave
Cape Coral, FL 33914

ARTICLE V INCORPORATOR

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

Joe Sabella 4209 SW 15th Ave
Cape Coral, FL 33914


Signature/Incorporator

REGISTERED AGENT

10/29/99
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.

SEE SIGNATURE ABOVE

Signature/Registered Agent

10/29/99

Date

SECRETARY OF STATE
TALAHASSEE, FLORIDA

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