

N04000010943

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

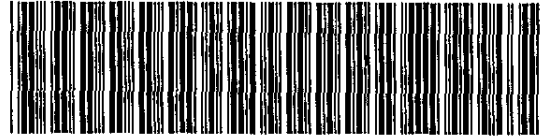
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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MAIL ROOM

N04-39065

BC 11/23



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

October 25, 2004

PATRICE W. GLENN
9621 ABERDARE AVENUE, WEST
JACKSONVILLE, FL 32208-1166

SUBJECT: BHG INCORPORATED
Ref. Number: W04000039065

We have received your document for BHG INCORPORATED and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

An effective date **may** be added to the Articles of Incorporation **if a 2005 date is needed**, otherwise the date of receipt will be the file date. **A separate article must be added to the Articles of Incorporation for the effective date.**

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6972.

Doris Brown
Document Specialist
New Filings Section

Letter Number: 504A00061149

TRANSMITTAL LETTER

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

SUBJECT: A.C.I.N.D. INCORPORATED
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

* A CHECK FOR 83.50 WAS ALREADY SENT IN. THIS TRANSMITTAL LETTER ACCOMPANIES THE INCORPORATION INFORMATION BECAUSE WE HAD TO SELECT A NEW NAME.

Filing Fee Filing Fee,
Certificate of & Certified Copy Certified Copy
Status & Certificate

ADDITIONAL COPY REQUIRED

FROM: PATRICE W. GLENN

Name (Printed or typed)

9621 ABERDARE AVENUE, WEST

Address

JACKSONVILLE, FL 32208

City, State & Zip

9047689557

Daytime Telephone number

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

;) - 4/6/95



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

November 15, 2004

PARTICIA W GLENN
9621 ABERDARE AVE W
JACKSONVILLE, FL 32208

SUBJECT: A.C.I.N.D. INCORPORATED
Ref. Number: W04000041695

We have received your document for A.C.I.N.D. INCORPORATED. However, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$87.50. Your document will be retained in our pending file.

When you send the check, please let me know how the initial directors will be elected.

If you have any further questions concerning your document, please call (850) 245-6919.

Beth Register
Document Specialist Supervisor
New Filings Section

Letter Number: 004A00064881

ARTICLES OF INCORPORATION
In Compliance with Chapter 617, F.S., (Not for Profit)

STATE OF FLORIDA
NOV 23 2004
04 NOV 23 PM 12:01

ARTICLE I NAME

The name of the corporation shall be:

A.C.I.N.D. INCORPORATED

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:
9621 ABERDARE AVENUE, WEST
JACKSONVILLE, FL 32208

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
PROMOTING OUTSTANDING SCHOLARSHIP AND SOCIAL ENRICHMENT

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:
BY THE INITIAL BOARD OF DIRECTORS

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

List name(s), address(es) and specific title(s):
MICHAEL A. BROWN, 1101 HARST ROAD #207 JACKSONVILLE, FL 32218, DIRECTOR
PATRICE W. GLENN, 9621 ABERDARE AVENUE, WEST JACKSONVILLE, FL 32208, DIRECTOR
ROSE B. GLENN, 9621 ABERDARE AVENUE, WEST JACKSONVILLE, FL 32208, DIRECTOR
GARY T. HARTFIELD, 11277 FREEDOM COURT SEMINOLE, FL 33722, DIRECTOR

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:
PATRICE W. GLENN
9621 ABERDARE AVENUE, WEST
JACKSONVILLE, FL 32208

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:
GARY T. HARTFIELD
11277 FREEDOM COURT
SEMINOLE, FL 33722

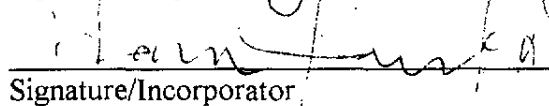
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.



Signature/Registered Agent

11/9/04

Date



Signature/Incorporator

11/9/04

Date