

Capital Connection

D04000159964

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
04 NOV 24 AM 9:15

Florida Department of State
Division of Corporations
Public Access System

EXPIRATION DATE
1-1-05

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H04000233886 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850)205-0381

From:

Account Name : YOUR CAPITAL CONNECTION, INC.
Account Number : I20000000257
Phone : (850)224-8870
Fax Number : (850)224-7047

FLORIDA PROFIT CORPORATION OR P.A.

IBAGS INC.

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

Electronic Filing Menu

Corporate Filing

Public Access Help

H04000233886 3

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

04 NOV 24 AM 9: 15

ARTICLES OF INCORPORATION

EFFECTIVE DATE
1-1-05

OF

IBAGS INC

The undersigned subscriber to these Articles of Incorporation under Sub Chapter S, hereby forms a corporation under the laws of the State of Florida.

ARTICLE I - NAME

The name of this corporation is: IBAGS INC.

The principal place of business and mailing address of this corporation is :

PRINCIPAL ADDRESS: 1558 SE HATFIELD COURT, PORT ST LUCIE FL34952

MAILING ADDRESS: P.O. BOX 7276, PORT ST. LUCIE, FL 34985

ARTICLE II - NATURE OF BUSINESS

This corporation may engage in any business activity permitted under the laws of the United States and the State of Florida.

ARTICLE III - CAPITAL STOCK

The maximum number of shares of stock that this corporation is authorized to have outstanding at any one time is one-hundred (100) shares of common stock with no par value per share.

ARTICLE IV - TERM OF EXISTENCE

The existence of the corporation shall be January 1, 2005, and shall be perpetual.

ARTICLE V - OFFICERS DIRECTORS

The name and street address of the initial officer and director, who shall hold office for the corporation are:

PRESIDENT:

STEVE DELAPLAINE
1558 SE HATFIELD COURT
PORT ST. LUCIE, FL 34952

H04000233886 3

H04000233886 3

ARTICLE VI - INCORPORATOR

The name and street address of the incorporation to this article of incorporation is:

**STEVE DELAPLAINE
1558 SE HATFIELD COURT
PORT ST. LUCIE, FL 34952**

WHEREOF, the undersigned incorporator has executed these ARTICLES OF INCORPORATION this 17 day of November 2004.

Signature of Incorporator

Steve Delaplane

**STATE OF FLORIDA
COUNTY OF ST. LUCIE**

THE FOREGOING instrument was acknowledged and sworn to by Steve Delaplane before me this 17 day of November 2004.



James E Childs
My Commission DC362792
Expires September 07, 2006

James E Childs
Notary Public

(SEAL)

**ARTICLES OF INCORPORATION FILING FEE: \$35.00
REGISTERED AGENT FILING FEE: \$35.00
CERTIFIED COPY REQUESTED: \$8.75**

H04000233886 3

H04000233886 3

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.325 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: **I BAGS INC.**
2. The name and address of the registered agent and office is:

STEVE DELAPLAINE
1538 SE HATFIELD COURT
PORT ST. LUCIE, FL 34952

Steve Delaplane
Corporate Officer
President
Title
11/10/04
Date

HAVE BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325 FLORIDA STATUTES.

Steve Delaplane
Registered Agent

FILED
SECRETARY OF STATE
DIVISION OF REGISTRATION
NOV 24 AM 9:16

H04000233886 3