

P060000/29913

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

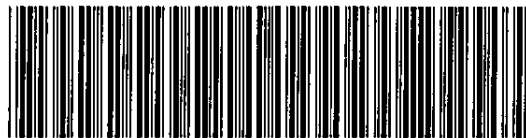
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100080569121

10/10/06 -01031- 003 **87.50

FILED
06 OCT 10 AM 8:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



COVER LETTER

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

SUBJECT: BARDIA CORPORATION
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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: DAVID B. ACKERMAN
Name (Printed or typed)

729 NEW WARRINGTON ROAD

Address

PENSACOLA, FL 32506

City, State & Zip

850/982-3180

Daytime Telephone number

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

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be: BARDIA CORPORATION

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is: 729 NEW WARRINGTON ROAD
PENSACOLA, FL 32506

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: INVESTMENT

ARTICLE IV SHARES

The number of shares of stock is: 200

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s): DAVID ACKERMAN
729 NEW WARRINGTON ROAD
PENSACOLA, FL 32506

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

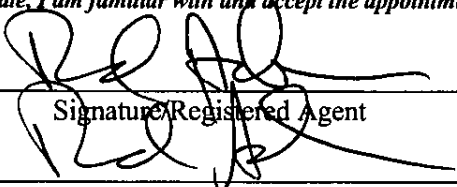
DAVID ACKERMAN
729 NEW WARRINGTON ROAD
PENSACOLA, FL 32506

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

DAVID ACKERMAN
729 NEW WARRINGTON ROAD
PENSACOLA, FL 32506

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

10-5-06

Date

10-5-06

Date

Signature/Incorporator

FILED
06 OCT 10 AM 8:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA