

P11000056894

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

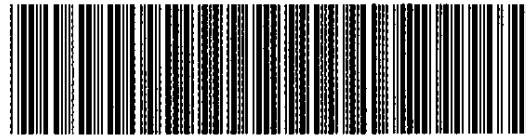
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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11 JUN 17 PM 12:35



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COVER LETTER

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

SUBJECT: Bullion Bankers Club, Inc.
(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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input checked="" type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: Barbara Thompson
Name (Printed or typed)

2058C Constitution Blvd.
Address

Sarasota, FL 34231
City, State & Zip

941-961-3567
Daytime Telephone number

battybet@aol.com
E-mail address: (to be used for future annual report notification)

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



STREET ADDRESS: 101 East Gaines Street, Suite 636 • PHONE (850) 410-9800 • FAX (850) 410-9548
MAILING ADDRESS: Division of Financial Institutions, 200 East Gaines Street, Tallahassee, FL 32399-0371
Visit us on the web: WWW.FLOFR.COM • Toll Free: (800) 848-3792

J. THOMAS CARDWELL
COMMISSIONER

May 26, 2011

11 JUN 17 PM 12:35
RECEIVED
DIVISION OF FINANCIAL INSTITUTIONS

Ms. Barbara Thompson
2058C Constitution Blvd.
Sarasota, FL 34231

Re: Bullion Bankers Club, Inc

Dear Ms. Thompson:

Thank you for your recent letter/fax requesting approval for use of the above-referenced name.

It is the opinion of this Office that the above-referenced corporate name is definitive enough to differentiate the business being conducted from that of a commercial bank or trust company. Therefore, the Office does not object to your use of the above-referenced name being registered to conduct business in the state of Florida. However, this does not give one the authority to act in any licensed capacity until all licensing requirements have been met within this state.

Sincerely,

Linda B. Charity
Director

LBC:bk

cc: Karon Beyer, Chief, Bureau of Commercial Recordings, Division of Corporations,
Department of State

FINANCIAL SERVICES COMMISSION

RICK SCOTT
GOVERNOR

PAM BOND
ATTORNEY
GENERAL

JEFF ATWATER
CHIEF FINANCIAL
OFFICER

ADAM PUTNAM
COMMISSIONER OF
AGRICULTURE

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

Bullion Bankers Club, Inc.

The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address
2044 Constitution Boulevard
Sarasota, FL 34231

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any and all lawful business including private financial transactions.

ARTICLE IV SHARES

The number of shares of stock is 7500

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Bobby Todd, Chief Executive Officer Name and Title: _____
Address: 2044 Constitution Boulevard Address: _____
Sarasota, FL 34231 _____

Name and Title: Allen L. Davis, President Name and Title: _____
Address: 2058C Constitution Boulevard Address: _____
Sarasota, FL 34231 _____

Name and Title: Barbara Thompson, Secretary Name and Title: _____
Address: 2058C Constitution Boulevard Address: _____
Sarasota, FL 34231 _____

ARTICLE VI REGISTERED AGENT

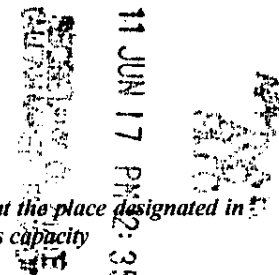
The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Barbara Thompson
Address: 2058C Constitution Boulevard
Sarasota, FL 34231

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Allen L. Davis
Address: 2058C Constitution Boulevard
Sarasota, FL 34231



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

Barbara Thompson
Required Signature/Registered Agent

June 10, 2011
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Allen Davis
Allen Davis
Required Signature/Incorporator

June 10, 2011
Date