



**COVER LETTER**

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

**SUBJECT:** Bay 2 Beaches Team, P.A.  
(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 type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
<b>ADDITIONAL COPY REQUIRED</b>	

**FROM:** Archie W. Campbell, III  
Name (Printed or typed)

10292 Oasis Palm Drive  
Address

Tampa, FL 33615  
City, State & Zip

813-361-9699  
Daytime Telephone number

kltc@tampabay.rr.com  
E-mail address: (to be used for future annual report notification)

**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: Bay 2 Beaches Team, P.A.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

10292 Oasis Palm Drive  
Tampa FL 33615

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: To engage in the business  
of buying and selling residential and/or commercial  
Real Estate.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE IV SHARES**

The number of shares of stock is: 100

2015 JUL 27 PM 1:41

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Archiew Campbell III, Officer Name and Title: \_\_\_\_\_

Address 10292 Oasis Palm Dr. Address: \_\_\_\_\_  
Tampa FL 33615 \_\_\_\_\_

Name and Title: Kristin L. Tardy-Campbell, Officer Name and Title: \_\_\_\_\_

Address 10292 Oasis Palm Dr. Address: \_\_\_\_\_  
Tampa FL 33615 \_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address \_\_\_\_\_ Address: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_  
Address \_\_\_\_\_ Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

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

Name: Archie W. Campbell, III  
Address: 10292 Oasis Palm Dr.  
Tampa, FL 33615

**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

Name: Archie W. Campbell III  
Address: 10292 Oasis Palm Dr.  
Tampa, FL 33615

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

*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*

Archie W. Campbell III  
Required Signature/Registered Agent

07/17/2015  
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.*

Archie W. Campbell III  
Required Signature/Incorporator

07/17/2015  
Date