

N01000001951

TRANSMITTAL LETTER

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

000003854170--2
-03/15/01--01063--007
*****78.75 *****78.75

SUBJECT: B.A.M. INCORPORATED
(Proposed corporate name - must include suffix)

Enclosed is 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

ADDITIONAL COPY REQUIRED

Joyce
AUTHORIZATION BY PHONE TO
CORRECT articles (Name)
DATE 3/20/01
DOC. EXAM Dan White

FROM: JOYCE SCHOONOVER
Name (Printed or typed)

4114 Hollis Avenue
Address

Port Charlotte Florida 33953
City, State & Zip

941-613-2440 or 941-268-4003 (cell)
Daytime Telephone number

FILED
01 MAR 15 AM 10:16
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Not For Profit Corporation Act, hereby adopt(s) the following Articles of Incorporation:

ARTICLE I NAME

The name of the corporation shall be:

BETTER AFFORDABLE MEDICAL, INCORPORATED

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

4114 Hollis Avenue
Port Charlotte, Florida 33953

ARTICLE III PURPOSE(S)

The specific purpose(s) for which the corporation is organized is(are):

1. To have a grassroots organization to fight for better and more affordable healthcare.
2. To raise funds, to help people, in need, with the cost of healthcare and prescriptions. Criteria to be set in the by-laws for this program. This program will not only be for the children, the senior citizens, but, for the forgotten many in the middle age group.

ARTICLE IV MANNER OF ELECTIONS OF DIRECTORS

The manner in which the directors are elected or appointed is:

I have contacted several persons about being appointed as directors. After, I receive the incorporation paperwork, I will call a meeting, with at least three(3) days notice. The directors will be appointed at this time.

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial agent are:

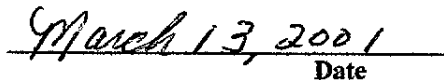
Joyce Schoonover
4114 Hollis Avenue
Port Charlotte, Florida 33953

ARTICLE VI INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Joyce Schoonover
4114 Hollis Avenue
Port Charlotte, Florida 33953


Signature/Incorporator


Date

(An additional article must be added if an effective date is requested.)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all the statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my positions as registered agent.


Signature/Registered Agent


Date

FILED

01 MAR 15 AM 10:17

SECRETARY OF STATE
TALLAHASSEE FLORIDA