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(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
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COVER LETTER

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

SUBJECT: FLA PRO	DFESSIONAL BOOKMEI	N ASSN INC	
SUBJECT: VENT	(PROPOSED CORPORATI	E NAME – <u>MUST INCLU</u>	DE SUFFIX)
Enclosed is an original	and one(1) copy of the Article	es of Incorporation and a	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	
FROM:	MICHAEL J. RIOUX Name (Prin	nted or typed)	_
	8363 WEYBRIDGE DRIVE Address		
JACKSONVILLE, FL 32244 City, State & Zip			-
	904-779-0561		

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

Daytime Telephone number

ARTICLES OF INCORPORATION

In Compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE I NAME

The name of the corporation shall be:

FLA PROFESSIONAL BOOKMEN ASSN., INC.

ARTICLE II PRINCIPAL OFFICE

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

8263 WEYBRIDGE DRIVE JACKSONVILLE, FL 32244

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

BUSINESS LEAGUE OF EDUCATIONAL BOOKSELLERS WITH COMMON BUSINESS INTEREST WHICH DOES NOT ENGAGE IN ANY PROFIT MAKING ACTIVITY.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

ELECTED BY MEMBERS.

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

List name(s), address(es) and specific title(s):

MICHAEL J. RIOUX, PRESIDENT, 8263 WEYBRIDGE DR., JACKSONVILLE, FL 32244

KEVIN BECHERT, V. PRESIDENT, 2141 SW 28TH WAY, FT. LAUDERDALE, FL 33312

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

MICHAEL J. RIOUX 8263 WEYBRIDGE DRIVE JACKSONVILLE, FL 32244

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

MICHAEL J. RIOUX 8263 WEYBRIDGE DRIVE JACKSONVILLE, FL 32244

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificates, amfamiliar with and accept the appointment as registered agent and agree to act in this capacity.

Signature/Registered/Agent

Signature/Incorporator

Date

Date