# TRANSMITTAL LETTER

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

SUBJECT:	Bisous	-	SEU TALL
Enclosed is an origi	(Proposed corpo	rate name - must include suf	ASSEL FLORIG
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status
FROM: Richard & Bissone He JR  Name (Printed or typed)  6000 Cy Press Grove Circle  Address			
	Punta Corda City, S		<u>82</u>
BICKIRG BISOME AUTHORIZATION BY P CORRECT HRT. I DATE 113 DOC. EXAM S	He GAVE	505 - 9600 Elephone number	

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
Business Corporation Act, hereby adopts the following Articles of Incorporation.

#### ARTICLE I NAME

The name of the corporation shall be:

BISOUS FOR YOU INC

## ARTICLE II PRINCIPAL OFFICE

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

321 TAY for St Punta Gorda Fl 33950

#### ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100.

## ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Richard & Bissonette

6000 Cypress Grove Circle Punta Gorda fl 33582

### ARTICLE V INCORPORATOR

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

Richard & Bissonets

6000 cypress Grove circle punta Guida #1 53552

Signature/Incorporator

Dote

(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 statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent

Signature/Registered Agent

Date