

P00000068437

TRANSMITTAL LETTER

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

FILED
00 JUL 17 PM 12:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SUBJECT: The Bill Payment Center, ETC Inc
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)
300003311373-6
-07/03/00--01094--014
*****87.50 *****87.50

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 of
Status

ADDITIONAL COPY REQUIRED

FROM: Karen Chung
Name (Printed or typed)

9085 N.W. 55 Court
Address

Sunrise, Fla. 33351
City, State & Zip

(954) 718-4426
Daytime Telephone number

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

7-18-00
CDB
3



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

July 7, 2000

KAREN CHUNG
9085 N.W. 55 CT.
SUNRISE, FL 33351

SUBJECT: THE BILL PAYMENT CENTER, ETC.
Ref. Number: W00000017134

We have received your document for THE BILL PAYMENT CENTER, ETC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with an address and telephone number where you can be reached during working hours.

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6930.

Carolyn Gurr
Document Specialist

Letter Number: 600A00037694

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:

The Bill Payment Center, ETC. INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

9085 N.W. 55 Court, Sunrise
Florida, 33351

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Bill Payment.

ARTICLE IV SHARES

The number of shares of stock is:

- 100 -

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

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ARTICLE VI REGISTERED AGENT

The name and Florida street address registered agent is:

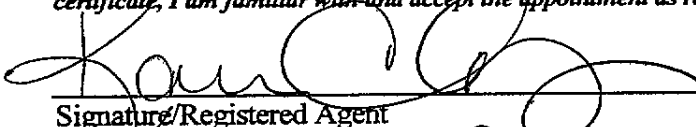
Karen Chung - 9085 N.W. 55
Court, Sunrise, Fl.
33351

ARTICLE VII INCORPORATOR

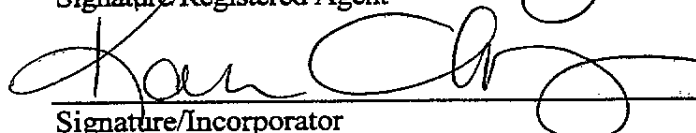
The name and address of the Incorporator is:

Karen Chung - 9085 N.W. 55
Court, Sunrise, Fl.
33351

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


Signature/Registered Agent

6/28/2000
Date


Signature/Incorporator

6/28/2000
Date