

P00000079934

TRANSMITTAL LETTER

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

FILED
00 AUG 14 AM 9:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SUBJECT: Blue Streak Reprographics of Florida, Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

300003355593--6
-08/14/00--01103--004
*****78.75 *****78.75

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: David Archibald
Name (Printed or typed)

PO Box 1054

Address

Thonotosassa FL 33592

City, State & Zip

813-986-3888

Daytime Telephone number

EFFECTIVE DATE
08-11-00

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

w-20356
Jr 8/18



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

August 18, 2000

DAVID ARCHIBALD
P.O. BOX 1054
THONOTOSASSA, FL 33592

SUBJECT: BLUE STREAK REPROGRAPHICS OF FLORIDA, INC.
Ref. Number: W00000020356

We have received your document for BLUE STREAK REPROGRAPHICS OF FLORIDA, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

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) 487-6878.

Alan Crum
Document Specialist

Letter Number: 000A00044444

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:

Blue Streak Reprographics and Printing, Inc.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

10802 E. Main Street Ste C
Thonotosassa FL 33592

P.O. Box 1054
Thonotosassa FL 33592

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Blueprinting Services

ARTICLE IV SHARES

The number of shares of stock is:

1,000

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

David D. Archibald - V.P. / Secretary / Treasurer
Peggy S. Archibald - President

Same address
6113 Bob Head Rd.
Plant City FL
33565

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

David Archibald
6113 Bob Head Rd.
Plant City FL 33565

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Peggy S. Archibald
6113 Bob Head Rd.
Plant City FL 33565

Article VIII

Effective date

8/11/00

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



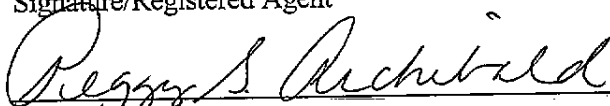
Signature/Registered Agent

8/11/00

Date

EFFECTIVE DATE

08-11-00



Signature/Incorporator

8/11/2000

Date