TRANSMITTAL LETTER Department of State

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

SUBJECT:	(PROPOSED CORPORAL	<i>VC'A STOUD</i> TE NAME – <u>MUST INCL</u>	UDE SUFFIX)	
Enclosed is an origina	al and one(1) copy of the article	_	200003428 -10/18/00 *****87,50 check for :	-01050011
\$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:	501 BLAIRSTO	rinted or typed) Address State & Zip	DEPARIMENT OF STATE DIVISION OF CORPORATIONS TALLAHASSEE, FLORIDA	RECEIVED
	(850) 402-C Daytime T	3647 elephone number	SECRETAL TALLAHASS	1 130 00 F

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

ADTICLES OF INCORPORATION
ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)
In compliance with Chapter 607 and 61 Chapter 621, 1.5. (11915)
ARTICLE I NAME
The name of the corporation shall be:
BlueBirt Financial Group INC.
ARTICLE II PRINCIPAL OFFICE
The principal place of business/mailing address is:
501 BIAIRSTONE Road Apt, 1728
TALAHASSEE, 5-1 32301
ARTICLE III PURPOSE
The purpose for which the corporation is organized is:
ARTICLE IV SHARES The number of shares of stock is:
100,000
•
ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)
The name(s) and address(es):
TALE CLO
Figure 1 and 1
ARTICLE VI REGISTERED AGENT
ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is:
OMARI A. ENGRAM
501 BIAIRSTONE Road Apt. 1728
-m
TAllAhASSEE, FL 32301
ARTICLE VII INCORPORATOR The name and address of the Incorporator is:
Omari A. Engram
501 BIAIRSTONE Road Apt. 1728
TALLALASSEE, 12 32301

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
10/18/00
Signature/Registered Agent Date

Date

Signature/Incorporator