

TRANSMITTAL LETTER

P000000099721

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

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-10/23/00--01095--015

*****70.00 *****70.00

SUBJECT: Blu-Print, Inc.
 (Proposed corporate name - must include suffix)

Enclosed is an original and (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: Angela H. Gantt
 Name (Printed or Typed)

3355 W. Vine Street, Suite 102
 Address

Kissimmee, FL 34741
 City, State & Zip

(407) 931-2344
 Daytime Telephone number

FILED
 00 OCT 23 AM 8:33
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

O.K. per KB
 10-24

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

KB
 10-24

ARTICLES OF INCORPORATION
(FLORIDA)

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: Blu-Print, Inc.

ARTICLE II - Principle Office

The principal place of business and mailing address of this corporation shall be: 2200 Chappell Court
Kissimmee, Fl. 34746

ARTICLE III - Shares

The number of shares that this corporation is authorized to have outstanding at any one time is: 1,000,000

ARTICLE IV - Initial Registered Agent and Street Address

The name and Florida street address of the initial registered agent is: Byrd & Gantt, CPAs, P.A., 3355 W.
Vine St. Ste 102, Kissimmee, Fl 34741.

ARTICLE V - Incorporator

The name and address of the incorporator to these Articles of Incorporation are: Vernon la Cock, 2200
Chappell Court, Kissimmee, Fl 34746

Signature of Incorporator

Date

Having 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 of Registered Agent

Date

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