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TRANSMITTAL LETTER
FILED

01 MAR 26 PM 4:37

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

SECRETARY OF STATE
TALLAHASSEE FLORIDA

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*****87.50 *****87.50

SUBJECT:

BIZ-MAIL CORPORATION

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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 VOLL

Name (Printed or typed)

P.O. Box 1527

Address

NOKomis, FL 34874-1527

City, State & Zip

(941) 966-6245

Daytime Telephone number

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

D. WHITE MAR 29 2001

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ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

BIZ-MAIL CORPORATION

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

P.O. Box 1527
NOVOMIS, FL 34274-1527

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

FOR-PROFIT CORPORATION

ARTICLE IV SHARES

The number of shares of stock is:

100 SHARES Common Stock

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

ARTICLE VI REGISTERED AGENT

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

KAREN KROLL
319 DEGAS DRIVE, NOVOMIS, FLORIDA 34275

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

KAREN KROLL
319 DEGAS DRIVE, NOVOMIS, FLORIDA 34275

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

Karen M. Kroll
Signature/Registered Agent

3-20-01
Date

Karen M. Kroll
Signature/Incorporator

3-20-01
Date