TRANS	MITTAL LETTER			
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Department of State			ł	
Division of Corporations	-	-		
P. O. Box 6327 Tallahassee, FL 32314				
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		<u> </u>	00 000000000000000000000000000000000000	
SUBJECT: <u>Barry Financial Service</u> (PROPOSED CORPO	es, Inc. RATE NAME – <u>MUST INCI</u>	LUDE SUFFIX)		
		*		
Enclosed is an original and one(1) copy of the ar	ticles of incorporation and	a check for :		
<b>\$</b> 70.00 <b>\$</b> 78.75	\$78.75	▲ \$87.50		
Filing Fee Filing Fee	Filing Fee	Filing Fee,		
& Certificate of Status	& Certified Copy	Certified Copy & Certificate of		
	ADDITIONAL CO	Status		
FROM: <u>Ray J. Barry</u>	(Drinted entropy)		0	
	e (Printed or typed)			
ste عططت 121, 934 Nort	h_University_Drive Address			. <u>-</u>
	Aduress			
<u>Coral Springs, Fl</u>	L 33071		E D AM 10: 02	÷.,
C	ity, State & Zip	IDA	02	
(888) 982-1706				<b>.</b> .
Daytim	ne Telephone number			
1 prov	142			
3010000				
NOTE: Please provide the	e original and one copy of	f the articles.		

T. Burch MAR 3 0 2001



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

March 16, 2001

RAY J. BARRY PMB 121 934 NORTH UNIVERSITY DRIVE CORAL SPRINGS, FL 33071

SUBJECT: BARRY FINANCIAL SERVICES, INC. Ref. Number: W01000006058

We have received your document for BARRY FINANCIAL SERVICES, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must have a Florida street address. A post office box, personal mail box (PMB), or mail drop-box address 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) 487-6928.

Tim Burch Document Specialist

Letter Number: 201A00016257

<u>.</u> '	Ar Ar
40	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: Barry Financial Services, Inc.
	$\mathbf{m}_{\mathcal{C}}$
	ARTICLE II PRINCIPAL OFFICE
	ARTICLE II PRINCIPAL OFFICE
	The principal place of business/mailing address is: $\gamma$
	934 North University Drive, Suite 121, Coral Springs, FL 33071
	ARTICLE III PURPOSE
	The purpose for which the corporation is organized is: To provide services, products, advice, and any other related services, product
	or information in the following areas: Managed Care Services, Insurance and Securities Services, and General Financial Planning Services.
	ARTICLE IV SHARES
	The number of shares of stock is:
	100 Shares
	ARTICLE V INITIAL OFFICERS (DIRECTORS (optional)
	The name(s) and address(es):
	President: Ray J. Barry, 934 North University Drive, Suite 121, Coral Springs, FL 33071 Treasurer/Secretary: Rene D. Crawford, 934 North University Drive, Suite 121, Coral Springs, FL 33071
	ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is:
	The name and Therman Street address of the registered agent is.
	Ray J. Barry, 934 North University Drive, Suite 121, Coral Springs, FL 33071
	ARTICLE VII INCORPORATOR
	The <u>name and address</u> of the Incorporator is:
	Ray J. Barry, 934 North University Drive, Suite 121, Coral Springs, FL 33071
	**************************************
ı	certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity
	BODE
1	Signature/Registered Agent, Ray J. Barry Date
$\langle$	
/.	thay Janny 3/27/01
C	Signature/Inforporator, Ray J. Barry Date

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