

TRANSMITTAL LETTER

PO10000034656

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

EFFECTIVE DATE
04/01/01

SUBJECT:

Bead Hawk, Inc.

(Proposed corporate name - must include suffix)

400003943144---G
-04/02/01--01081--005
*****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

☐ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM:

Susan Hawkins

Name (Printed or typed)

14180 Beach Blvd.

Address

Jacksonville, FL 32250

City, State & Zip

904-821-9494

Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01 APR -2 AM 11:05

FILED

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

G. BULLOCK APR 05 2001

3

EFFECTIVE DATE
04/01/01

ARTICLES OF INCORPORATION

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:

Bead Hawk, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

14180 Beach Blvd.
Jacksonville, FL 32250

ARTICLE III SHARES

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

1000 shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Susan Hawkins
14180 Beach Blvd
Jacksonville, FL 32250

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Susan Hawkins
14180 Beach Blvd
Jacksonville, FL 32250

Susan C. Hawkins
Signature/Incorporator

4-1-01
Date

(An additional article must be added if an effective date is requested.)

Having been 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

Susan C. Hawkins
Signature/Registered Agent

4-1-01
Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VI

An effective date of April 1, 2001 is requested.