POLOCOS 1303

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

SUBJECT:	PROPOSED CORPORATE	TE NAME – <u>MUST INCL</u>		2001 APR -9 PM 2: 06 SECRETALY OF STATE TAIL AHASSEE FLORING
☐ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy ADDITIONAL CO	S87.50 Filing Fee, Certified Copy & Certificate o Status PPY REQUIRED	
FROM:	Name (Pr	BOUCK inted or typed) ARD BUI		9730533 970101127010 78.75 *****78.75
	301 454	ISLAND State & Zip 2224 H	FL 329 321 454 9	

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

F4/12/01

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:	2001 ADD O DV
Logoisms INC.	2001 APR -9 PM 2: 06 SECRETARY OF STATE TALLAHASSEE FLORIDA
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is:	TO THE PROPERTY OF THE PROPERT
1470 GIRARD BLVD. MERRITT ISLAND FL 32952 ARTICLE III PURPOSE The purpose for which the corporation is organized is:	
PROFESSIONAL CORP.	
ARTICLE IV SHARES The number of shares of stock is:	
ARTICLE V INITIAL OFFICERS DIRECTORS (optional) The name(s) and address(es): HILDA BOUCK SIYNO GRAD BLVD BRIAN BOUCK SIYNO GRAD BLVD MERRITT ISLAWID F	223252
ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is:	
HILDA BOUCK 1490 GIRARD BLUD. MERRITT ISLAND EL BOSSO ARTICLEVII INCORPORATOR	
The <u>name and address</u> of the Incorporator is: ILDA BOUCK IYOU CIRARD BLUD NECOCATE TO COMPACE	· · · · · · · · · · · · · · · · · · ·
Having been named as registered agent to accept service of process for the above stated corporate	
certificate, I am familiar with and accept the appointment as registered agent and agree to act in a	this capacity 4/6/01
Signature/Registered Agent Date Control Description D	4/5/01 Pate