

TRANSMITTAL LETTER

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

01000042107

SUBJECT:

BOARD & BLOOM, INC.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

900004077609--9
-04/25/01--01073--007
*****87.50 *****87.50

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:

SHERYL A. SWENSON

Name (Printed or typed)

9848 PINE ST.

Address

MICCO, FL, 32976

City, State & Zip

(321) 288-5818

Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01 APR 25 AM 10:51

FILED

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

SMITH APR 26 2001

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:

BOARD & BLOOM, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

9848 PINE ST
MICCO, FL. 32976

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

MARKETING GOODS & SERVICES

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

PRESIDENT/SECRETARY

SHERYL A. SWENSON
9848 PINE ST.
MICCO, FL. 32976

VICE PRESIDENT/
TREASURER

DANIEL E. SWENSON
9848 PINE ST.
MICCO, FL. 32976

ARTICLE VI REGISTERED AGENT

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

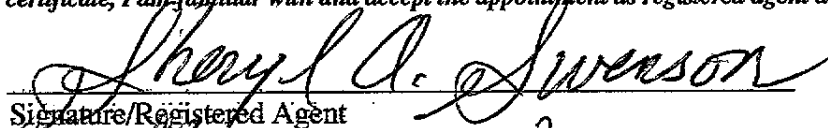
SHERYL A. SWENSON
9848 PINE ST.
MICCO, FL. 32976

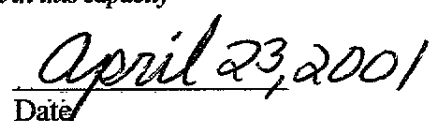
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

SHERYL A. SWENSON
9848 PINE ST.
MICCO, FL. 32976

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


Signature/Registered Agent


Date


Signature/Incorporator


Date

FILED
01 APR 25 AM 10:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA