

P010000112297

TRANSMITTAL LETTER

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

700004690677--5  
-11/21/01--01041--015  
\*\*\*\*472.50 \*\*\*\*\*78.75

SUBJECT: Foxie Par, Inc  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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: Franklin Battles  
Name (Printed or typed)

5100-318 S. Cleveland Ave II  
Address

Fort Meyers FL 33907  
City, State & Zip

913-402-9844  
Daytime Telephone number

FILED  
01 NOV 21 PM 12:07  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

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

2 WHITE NOV 27 2001 2

**ARTICLES OF INCORPORATION**

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

FILED

01 NOV 21 PM 12:07

**ARTICLE I NAME**

The name of the corporation shall be: *Foxie Par, Inc*

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

*5100-318 S. Cleveland Ave #196  
Fort Meyers FL 33907*

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

*investment services*

**ARTICLE IV SHARES**

The number of shares of stock is: *1000*

**ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)**

The name(s), address(es) and title(s): *Franklin Battles, Pres/Dir.  
5100-318 S. Cleveland Ave #196  
Fort Meyers FL 33907*

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address of the registered agent is: *Franklin Battles  
5100-318 S. Cleveland Ave #196  
Fort Meyers FL 33907*

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is: *Scott Ruther  
8877 Bourgade  
Lenexa KS 66219*

\*\*\*\*\*  
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

*Franklin D. Battles*  
\_\_\_\_\_  
Signature/Registered Agent

*11/16/01*  
\_\_\_\_\_  
Date

*Scott Ruther*  
\_\_\_\_\_  
Signature/Incorporator

*11/16/01*  
\_\_\_\_\_  
Date