

TRANSMITTAL LETTER

Department of State
Division of Corporation
P.O. Box 1527
Tallahassee, FL 32314

200007726552--6
-09/13/02--01026--012
*****78.75 *****78.75

SUBJECT: BUGGS, 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: Trod Buggs

Name (Printed or typed)

434 Woodcrest Street

Address

Winter Springs, Florida 32708

City, State & Zip

(407) 327-4692

Daytime Telephone number

FILED
02 SEP 13 PM 2:03
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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

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:

BUGGS INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

434 Woodcrest Street
Winter Springs, Florida 32708

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
To build residential and commercial structures.

ARTICLE IV SHARES

The number of shares of stock is:

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

(President) Trod Buggs, 434 Woodcrest Street. Winter Springs, Florida 32708
(Vice President) Tamara Buggs, 434 Woodcrest Street. Winter Springs, Florida 32708
(Project Manager/Coordinator) Gregory Buggs, 835 West Orange Blossom Trail.
Apopka, Florida 32712

ARTICLE VI REGISTERED AGENT

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

Trod Buggs
434 Woodcrest st.
Winter Springs, Florida 32708

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Trod Buggs
434 Woodcrest Street
Winter Springs, Florida 32708

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

TROD BUGGS

Date

Signature/Incorporator

TROD BUGGS

Date

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