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DALARIANY OF STATE

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TRANSMITTAL LETTER

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

SUBJECT: O.	B. J., Inc.			
	(PROPOSED CORPORA	ie name – <u>Must Incl</u>	UDE SUFFIX)	
Enclosed are an orig	rinal and one (1) copy of the arti-	cles of incorporation and	d a check for:	
\$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	☑ \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	S87.50 Filing Fee, Certified Copy & Certificate of Status DPY REQUIRED	
FROM:	Jane E. Jackson			
	Name (Printed or typed)		
	10847 Crescent Lane			
Address				
	Clermont, Florida 34711			
	City,	State & Zip		
	(352) 394-4929			
·	Daytime T	elephone number		

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

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FILED

03 JAN 21 PM 4: 12

JECKLIARY OF STATE TALLAHASSEE, FLORIDA

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:

O. B. J., Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 10847 Crescent Lane, Clermont, Florida 34711

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Entertainment Consulting

ARTICLE IV SHARES

The number of shares of stock is: 10,000

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

Jane E. Jackson

10847 Crescent Lane, Clermont, Florida 34711

ARTICLE VI REGISTERED AGENT

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

Jane E. Jackson

10847 Crescent Lane, Clermont, Florida 34711

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Jane E. Jackson

10847 Crescent Lane, Clermont, Florida 34711

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

Signature/Incorporator

1/16/03 Date

416 03 Date