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(Requestor's Name) (Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	
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SECRETARY DE STATE

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TRANSMITTAL LETTER

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

SUBJECT: <u>SPA</u>	-LON by BINA, INC. (PROPOSED CORPORATE NAM	IF - MUST INCLUDE SUFI	FEX
Enclosed is an origina	al and one (1) copy of the articles		
☐ \$70.00 Filing Fee	■ \$78.75Filing Fee& Certificate of Status	☐ \$78.75 Filing Fee & Certified Copy	☐ \$87.50 Filing Fee, Certified Copy & Certificate of Status
		ADDITIONAL C	OPY REQUIRED
	FROM: Carol J. Dunz Name	1 (Printed or typed)	
	3191-B Harbo		
	Addre	:SS	
	Port Charlott	e, FL 33952	
	City,	State & Zip	
	941-629-8886	5	
		me Telephone number	

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

ARTICLE I NAME	~.
The name of the corporation shall be: SPA-LON by BINA, INC	03 " FILED
, , , , , , , , , , , , , , , , , , ,	FILED 03 JUL 11 PM 5: 52 TALLAHASSEE, FLORIDA
ARTICLE II PRINCIPAL OFFICE	TALLAE MARY S. 52
The principal place of business/mailing address is:	ASSEE, FI TATE
3191-B HARBOR BLVD	LURIDA
PORT CHARLOTTE FL 33952	
ARTICLE HI PURPOSE	
The purpose for which the corporation is organized is:	
BUSINESS, WHICH SHALL BE FOR LAWFUL PURPOSE IN	STATE OF FLORIDA
ARTICLE IV SHARES	•
The number of shares of stock is: 1000 SHARES	•
ADTICLE W INITIAL OFFICEDS/DIDECTORS (antions	T)
ARTICLE V INITIAL OFFICERS/DIRECTORS (options The name(s) and address (es):	<u>.h</u>
ARTICLE V INITIAL OFFICERS/DIRECTORS (options The name(s) and address (es):	<u>1)</u>
	<u>.</u>
	<u>I</u>
The name(s) and address (es):	<u>h</u>
The name(s) and address (es): ARTICLE VI REGISTERED AGENT	<u>I)</u>
The name(s) and address (es): ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is:	D
The name(s) and address (es): ARTICLE VI REGISTERED AGENT	<u>h</u>
The name(s) and address (es): ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is: CAROL J DUNN	D
The name(s) and address (es): ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is: CAROL J DUNN 3191-B HARBOR BLVD PORT CHARLOTTE FL 33952	<u> </u>
The name(s) and address (es): ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is: CAROL J DUNN 3191-B HARBOR BLVD	D
The name(s) and address (es): ARTICLE VI REGISTERED AGENT The name and Florida street address of the registered agent is: CAROL J DUNN 3191-B HARBOR BLVD PORT CHARLOTTE FL 33952 ARTICLE VII INCORPORATOR	<u> </u>

certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.

Date

Date