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| PICK-UP | ☐ WAIT | MAIL |
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| (DOC | cument Number) | |
| Certified Copies | Certificates | of Status |
| | | |
| Special Instructions to F | iling Officer: | |
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SECRETARY OF STATE

149/1.

TRANSMITTAL LETTER

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

| SUBJECT: A BI | T OF INK, INC. | | |
|----------------------|-----------------------------------|----------------------------|------------------|
| | (PROPOSED CORPORA | TENAME - MUSTINGE | UDE SUFFIX) |
| | | | |
| | | | |
| Enclosed are an orig | ginal and one (1) copy of the art | icles of incorporation and | a check for: |
| ☑ \$70.00 | \$78.75 | \$78.75 | □ \$87.50 |
| Filing Fee | Filing Fee | Filing Fee | Filing Fee, |
| 7 11111 T C | & Certificate of Status | & Certified Copy | Certified Copy |
| | or confidence of Suras | a commod copy | & Certificate of |
| | | | Status |
| | | ADDITIONAL CO | |
| | | ADDITIONAL CO | 77 7 REQUIRED |
| FROM: N | lonica L. Mirones | | |
| | Name | (Printed or typed) | <u>,</u> |
| | 125 Woodcrest Lane | | |
| | | Address | |
| | Key Bisayne, FL 33149 | | |
| | City | , State & Zip | |
| | (305) 613-3139 | | |
| | | Telephone number | |

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:

A BIT OF INK, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

125 WOODCREST LANE, KEY BISCAYNE, FL 33149

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: ONE HUNDRED (100)

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

MONICA L. MIRONES - DIRECTOR

ARTICLE VI REGISTERED AGENT

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

MONICA L. MIRONES 125 WOODCREST LANE, KEY BISCAYNE, FL 33149

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

MONICA L. MIRONES 125 WOODCREST LANE, KEY BISCAYNE, FL 33149

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

| Mon Continued | 9/2/03 |
| Signature Registered Agent | 9/2/03 |
| Date | 9/2/03 |
| Only the place designated in this capacity | 9/2/03 |
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