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SECRETARY C. STATE

TRANSMITTAL LETTER

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

SUBJECT:	Bill Arflin and Voncile Bail Bonds, Inc. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFLX)			
Enclosed are an orig	inal and one (1) copy of the artic	cles of incorporation and	l a check for:	
\$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	Filing Fee & Certified Copy	& Certificate of Status	
FROM:	Rick Boechat	(Printed or typed)		1
	9943 Beach Blvd Address			and the second
-	Jax Fl 32246	State & Zip	- -	. 4
	904-535-8861 Daytime T	elephone number	<u>. </u>	: · · · · · · · · · · · · · · · · · · ·

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)

FILED

ARTICLE I NAME

The name of the corporation shall be:

Bill Arflin and Voncile Bail Bonds, Inc.

O3 NOV 17 AM 11: 22 SECRETARY OF STATE TALLAHASSEE FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

515-2 North Liberty Street, Jax Fl 32202

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Bail Bonds

ARTICLE IV SHARES

The number of shares of stock is:

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Rick Boechat , 9943 Beach Blv Jax Fl 32246. President

ARTICLE VI REGISTERED AGENT

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

Rick Boechat, 9943 Beach Blvd Jax Fl 32246

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

Rick Boechat, 9943 Beach Blvd Jax Fl 32246

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/Pegistered Agent

nature/Incorporator

Data

Date