P03000145277

(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:			
(Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(Red	questor's Name)	
(Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status			
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(Add	dress)	
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status			
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(Add	lrace)	
PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	mac	ness;	
PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status			
(Business Entity Name) (Document Number) Certified Copies Certificates of Status	(City	//State/Zip/Phon	e #)
(Business Entity Name) (Document Number) Certified Copies Certificates of Status	, , ,		
(Document Number) Certified Copies Certificates of Status	☐ bick-nb	WAIT	MAIL
(Document Number) Certified Copies Certificates of Status			
(Document Number) Certified Copies Certificates of Status	(Bus	iness Entity Nar	me)
Certified Copies Certificates of Status	\		,
Certified Copies Certificates of Status			
	(Doc	ument Number)	
Special Instructions to Filing Officer:	Certified Copies	Certificates	of Status
Special Instructions to Filing Officer:			
Special Instructions to Filing Officer:			1
	Special Instructions to Filing Officer:		

Office Use Only



100024755481

12/01/03--01021--010 **87.50

O3 DEC -1 PM 2: 39
SECRETARY OF STATE
TALL AHASSEF FLORING

0. p. 03

TRANSMITTAL LETTER

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

SUBJECT: TRAVIS BURRIS INC.			
	(PROPOSED CORPORATE	NAME - MUST INCLUD	E SUFFIX)
		و	a abanda Kana
Enclosed is an origin	nal and one(1) copy of the articl	les of incorporation and	a check for:
\$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy	XX \$87.50 Filing Fee, Certified Copy & Certificate of Status
		ADDITIONAL CO	DRA KEGGIKED
	•	FROM:	
	SEBRINA S	-	
		rinted or typed)	A STATE OF THE PARTY OF THE PAR
	1	** *	
	2461 VILORT	WAY	مين دو مياند. مين دو مياند ايا د د د د د د د د د د د د د د د د د
76 C 986 100 100		Address	
	MIDDLEBURG, F		
	City,	, State & Zip	
	904-291-9098		en german en
	Daytume 1	Telephone number	

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:

TRAVIS BURRIS INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

2461 VIOLET WAY , MIDDLEBURG, FL. 32068

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TRANSACTING ANY AND ALL LAWFUL BUSINESS.

ARTICLE IV SHARES

The number of shares of stock is:

100 SHARES OD ONE DOLLAR (\$1.00) PAR VALUE COMMON STOCK.

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

PRESIDENT

SECRETARY

TRAVIS BURRIS 2461 VIOLET WAY SEBRINA SPENCER 2461 VILOET WAY

MIDDLEBURG, FL. 32068

MIDDLEBURG, FL. 32068

ARTICLE VI REGISTERED AGENT

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

SEBRINA SPENCER 2461 VILOET WAY

MIDDLEBURG, FL. 32068

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

SEBRINA SPENCER

2461 VILOET WAY

MIDDLEBURG, FL. 32068

Signature/Registered Agent SEBRINA SPENCER

11-26-03

Date

Date

Signature/Incorporator

SEBRINA SPENCER