

PA 4000064341

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

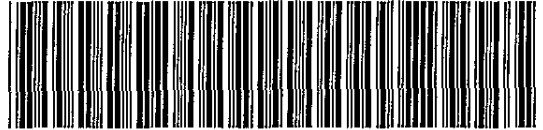
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

4-19-04

## TRANSMITTAL LETTER

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

**SUBJECT:** Bay Area Outsourcing, Inc.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☒ \$70.00      ☐ \$78.75  
Filing Fee      Filing Fee  
                         & Certificate of Status

☐ \$78.75      ☐ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                         & Certificate of  
                         Status

**ADDITIONAL COPY REQUIRED**

**FROM:** William Scott Wells

Name (Printed or typed)

6316 Turtle Creek Blvd

Address

Tampa FL 33625

City, State & Zip

813-695-1294

Daytime 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:

Bay Area Outsourcing, Inc.

### **ARTICLE II      PRINCIPAL OFFICE**

The principal place of business/mailling address is:

6316 Turtle Creek Blvd  
Tampa FL 33625

### **ARTICLE III      PURPOSE**

The purpose for which the corporation is organized is:

Any Lawful Purpose

### **ARTICLE IV      SHARES**

The number of shares of stock is:

100,000

### **ARTICLE V      INITIAL OFFICERS AND/OR DIRECTORS**

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

William Scott Wells, 6316 Turtle Creek Blvd, Tampa FL 33625 - All Offices

### **ARTICLE VI      REGISTERED AGENT**

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

William Scott Wells, 6316 Turtle Creek Blvd, Tampa FL 33625

### **ARTICLE VII      INCORPORATOR**

The name and address of the Incorporator is:

William Scott Wells, 6316 Turtle Creek Blvd, Tampa FL 33625

\*\*\*\*\*

*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

04/06/04  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

04/06/04  
\_\_\_\_\_  
Date

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA