

PO4000086 886

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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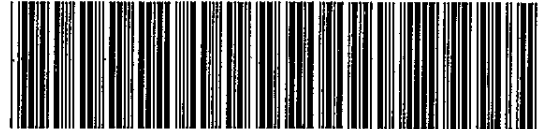
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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04 MAY 19 PM 2:38  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

7/25/04

## TRANSMITTAL LETTER

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

**SUBJECT:** BETTER BENEFITS GROUP, 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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
<b>ADDITIONAL COPY REQUIRED</b>	

**FROM:** DARYLL BORIS  
Name (Printed or typed)

261 GOLFVIEW DRIVE  
Address

TEQUESTA, FLORIDA 33469  
City, State & Zip

561-748-9505  
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:  
BETTER BENEFITS GROUP, INC.

### **ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:  
261 GOLFVIEW DRIVE  
TEQUESTA, FL 33469

### **ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:  
FOR PROFIT - INSURANCE SALES

### **ARTICLE IV SHARES**

The number of shares of stock is:  
100

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

List name(s), address(es) and specific title(s):  
DARYLL BORIS, PRES.  
261 GOLFVIEW DR.  
TEQUESTA, FL 33469



### **ARTICLE VI REGISTERED AGENT**

The name and Florida street address of the registered agent is:  
DARYLL BORIS  
261 GOLFVIEW DR.  
TEQUESTA, FL 33469

### **ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:  
DARYLL BORIS  
261 GOLFVIEW DR.  
TEQUESTA, FL 33469

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

MAY 16, 2004

Date

MAY 16, 2004

Date

FILED  
04 MAY 19 PM 2:39  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA