P04000095941

(Requestor's Name)				
(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:				





400038080094

06/23/04--01045--012 **87.50



TRANSMITTAL LETTER

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

SUBJECT: Boo	Mac Enterprises, Inc.			
	(PROPOSED CORPORAT	E NAME – <u>MUST INCL</u>	UDE SUFFIX)	
Enclosed are an orig	ginal and one (1) copy of the artic	les of incorporation and	a check for:	
☐ \$70.00 Filing Fee	☐ \$78.75 Filing Fce & Certificate of Status	S78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
FROM: N	ancy Hughes			
	Name (I	Printed or typed)		
5825 State Road 16				
	A	ddress	······································	
Saint Augustine, FL 32092				
	City, S	tate & Zip		
_	904-940-9130			
	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:

Boo Mac Enterprises, Inc.

FILED)

04 JUN 23 PM 2:08

SECH STATE TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 5825 State Road 16 Saint Augustine, FL 32092

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To provide goods and services to the female and/or elderly population.

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):

Nancy Hughes, President 5825 State Road 16 Saint Augustine, FL 32092

ARTICLE VI REGISTERED AGENT

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

Nancy Hughes 5825 State Road 16 Saint Augustine, FL 32092

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Nancy Hughes 5825 State Road 16 Saint Augustine, FL 32092

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

Date

Date