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(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

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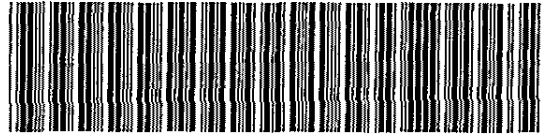
(Business Entity Name)

(Document Number)

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TRANSMITTAL LETTER

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

SUBJECT: Bay Capital Resources, 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
Filing Fee

☒ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

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

ADDITIONAL COPY REQUIRED

FROM: Roy A. Schwabe
Name (Printed or typed)

7612 Cypress Knoll Dr.
Address

New Port Richey, Florida 34653
City, State & Zip

(727)992-8047
Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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 Capital Resources, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

7612 Cypress Knoll Dr.
New Port Richey, FL 34653

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Investment Activities

ARTICLE IV SHARES

The number of shares of stock is:

1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Roy A. Schwabe, President
7612 Cypress Knoll Dr.
New Port Richey, FL 34653

Theresa M. Schwabe, Vice-President
7612 Cypress Knoll Dr.
New Port Richey, FL 34653

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Roy A. Schwabe
7612 Cypress Knoll Dr.
New Port Richey, FL 34653

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Shawn M. Folberg
PO Box 1131
Port Richey, FL 34673-1131

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

11/15/04

Date



Signature/Incorporator

11/15/04

Date

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TALLAHASSEE, FLORIDA

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