

PS000039240

(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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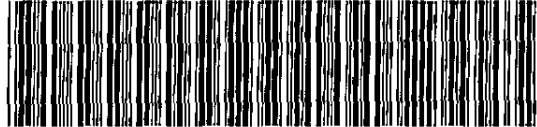
(Business Entity Name)

(Document Number)

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

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03/07/05 11:20:01  
JAN 15 2005

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JAN 15 2005

## TRANSMITTAL LETTER

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

SUBJECT: BAILEE'S POND, 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: ANN K. SMITH, ESQUIRE  
Name (Printed or typed)

550 WEST WATER STREET, SUITE 1150  
Address

JACKSONVILLE, FL 32202  
City, State & Zip

(904) 359-5505  
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:

BAILEE'S POND, INC.

### **ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailing address is:

P.O. BOX 8918  
JACKSONVILLE, FL 32239

### **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:

1 000

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

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

RALPH BENNETT  
P.O. BOX 8918  
JACKSONVILLE, FL 32239

### **ARTICLE VI REGISTERED AGENT**

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

ANN K. SMITH, ESQUIRE  
SMITH & GREENE, P.A.  
550 WEST WATER STREET, SUITE 1150  
JACKSONVILLE, FL 32202

### **ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

ANN K. SMITH, ESQUIRE  
SMITH & GREENE, P.A.  
550 WEST WATER STREET, SUITE 1150  
JACKSONVILLE, FL 32202

\*\*\*\*\*  
*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

03/04/05

\_\_\_\_\_  
Date

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

03/04/05

\_\_\_\_\_  
Date