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## TRANSMITTAL LETTER

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

SUBJECT:	(PROPOSED CORPOR	ATE NAME - MUST INCL	UDE SUFFIX)	_
Inclosed are an orig	inal and one (1) copy of the ar	ticles of incorporation and	l 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 CO		
FROM:	Michael	T. Bowe	<u> </u>	0
,	139 Forre	ster PL Address		05 APR 18
	Palm Coas	+ FL 321	137	S 44 9:23
	601 21	<b>~</b> . <b>^</b>		

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)	-
The name of the corporation shall be:  BEMARS THE MJ BOWE	NINC
ARTICLE II PRINCIPAL OFFICE  The principal place of business/mailing address is:  139 Forres  Palm Coas-	ter PL +, FL 3213
The purpose for which the corporation is organized is:	
ARTICLE IV SHARES The number of shares of stock is: \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s):  Michael J. Bowen 139 Forrester PL Palm Coast, FL 32137	President Vice Preside Treasurer
ARTICLE VI REGISTERED AGENT  The name and Florida street address (P.O. Box NOT acceptable) of the registered age	
Michael J. Bowen 139 Forrester 1 Palm Coast FL	32137 SAPR 1
ARTICLE VII INCORPORATOR	2 C R
The <u>name and address</u> of the Incorporator is: 139 Forrester	PL # 32
The name and address of the Incorporator is: 139 Forrester Michael J. Bowen Palm Coast F.	132137 至
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Having been named as registered agent to accept service of process for the above stated corporation a certificate, I am familiar with and accept the appointment as registered agent and agree to act in this ca	
Michael Honor 3- Signature/Registered Agent	-31-5 Date
Michael San 3-2	B1-5 Date
· ·	