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(Requestor's Name)				
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(Address)				
(City.	/State/Zip/Phone	e #)		
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(Document Number)				
Certified Copies	Certificates	of Status		
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TRANSMITTAL LETTER

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

SUBJECT:B	ind Expert Of Bonita, Inc.		MARTHURNINA
	(PROPOSED CORPORA)	IE NAME – <u>MUSI INCL</u>	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the artic	cles of incorporation and	a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	✓ \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED
FROM: Re	ene Gonzalez	(Printed or typed)	
	3440 Renaissance Blvd., Suite 5	Address	
	Bonita Springs, FL 34134-7004 City,	State & Zip	
	(239) 390-1400 Daytime Te	elephone 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:

Blind Expert Of Bonita, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 3440 Renaissance Blvd., Suite 5, Bonita Springs, FL 34134-7004

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Retail / Wholesale sales of window treatments.

ARTICLE IV SHARES

The number of shares of stock is: 7,500 Shares of Internal Revenue Code Section 1244 common stock

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):
Rene Gonzalez, President 6650 llex Circle, Apt. 6C, Naples, FL 34109

ARTICLE VI REGISTERED AGENT

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

Rene Gonzalez 3440 Renaissance Blvd., Suite 5, Bonita Springs, FL 34134-7004

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Rene Gonzalez 3440 Renaissance Blvd., Suite 5, Bonita Springs, FL 34134-7004

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

Date

4-28-05 Date

Signature/Incorporator