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05:04:15 PM

J. Shivers JUN 15 2005

## TRANSMITTAL LETTER

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

SUBJECT: BAMMA ENTERPRISES, 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: THEONA RICHARDS  
Name (Printed or typed)

821 TWIN LAKES DRIVE  
Address

CORAL SPRINGS, FL 33071  
City, State & Zip

(954) 752-7814  
Daytime Telephone number

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
05 JUN 15 PM 2:15

**NOTE: Please provide the original and one copy of the articles.**

**ARTICLES OF INCORPORATION**

**FOR**

**BAMMA ENTERPRISES, INC.**

**ARTICLE ONE: NAME**

The name of this corporation is **BAMMA ENTERPRISES, INC.**

**ARTICLE TWO: LOCATION OF PRINCIPAL OFFICE**

The principal office for the transaction of business of this corporation is to be located in Broward County, Florida at 821 Twin Lakes Drive, Coral Springs, Florida 33071.

**ARTICLE THREE: OBJECTS AND PURPOSES**

The objects and purposes for which this corporation is formed are:

To conduct and transact generally the business of a for-profit corporation and to do all things and exercise all powers and perform all functions that a for-profit corporation is authorized or empowered to do, exercise, or perform under and by virtue of the laws of the State of Florida], and may engage in any other types of business, insofar as it is consistent with the laws of the State of Florida.

**ARTICLE FOUR: CAPITALIZATION**

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THE TOTAL NUMBER OF SHARES THAT THE CORPORATION IS AUTHORIZED TO ISSUE IS 100 SHARES, AND ALL SUCH SHARES ARE TO HAVE A PAR VALUE, AND THE AGGREGATE PAR VALUE OF ALL SUCH SHARES IS ONE DOLLAR(S) (\$1.00).

**ARTICLE FIVE: REGISTERED AGENT**

The registered agent for service of process upon the corporation is:

Name	Address in [state]
<u>THEONA RICHARDS</u>	<u>821 TWIN LAKES DRIVE</u>
	<u>COREAL SPRINGS, FLORIDA 33071</u>

Having been named 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 of registered agent and agree to act in its capacity.



THEONA RICHARDS

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DIVISION OF CORPORATIONS  
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**ARTICLE SIX: DIRECTORS**


The number of directors of the corporation is 1; the following are the names and residences of the persons appointed to act as directors until their successors are elected and qualified:

Names	Residences
<u>THEONA RICHARDS</u>	<u>821 TWIN LAKES DRIVE</u>
	<u>CORAL SPRINGS, FLORIDA 33071</u>

**ARTICLE SEVEN: DURATION OF CORPORATE EXISTENCE**

The corporate existence of this corporation shall continue perpetually.

In witness whereof, I, the incorporator, have set my hand and seal on 13<sup>th</sup> day of June, 2005.



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THEONA RICHARDS