

PO5 000109545

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

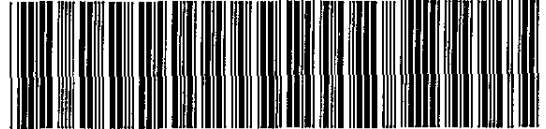
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

205-37289

Office Use Only



300058170823

08/08/05--01015--026 **78.75

FILED

05 AUG -8 PM 12: 33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED

05 AUG -8 PM 12: 03

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

1. Burch AUG 8 2005

TRANSMITTAL LETTER

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

SUBJECT: Old Blue, 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: Theresa M. Bender P.A.
Name (Printed or typed)

P.O. Box 14557
Address

Tallahassee, FL 32317
City, State & Zip

850 / 205-7777
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

August 8, 2005

THERSA M BENDER, P.A.
PO BOX 14557
TALLAHASSEE, FL 32317

SUBJECT: OLD BLUE, INC.
Ref. Number: W05000037289

We have received your document for OLD BLUE, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The registered agent must have a Florida street address. A post office box, personal mail box (PMB), or mail drop-box address is not acceptable.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6928.

Tim Burch
Document Specialist
New Filings Section

Letter Number: 605A00050814

**CERTIFICATE OF INCORPORATION
OF
OLD BLUE, INC.**

THE UNDERSIGNED, in order to form a corporation for the purposes hereinafter stated, under and pursuant to the provisions of the General Corporation Laws of the State of Florida, hereby certify as follows:

1. The name of the corporation is:

OLD BIG BLUE, INC.
~~OLD BLUE, INC.~~

2. The principle place and mailing address of the corporation in the State of Florida is:

124 W York Ct, Longwood, FL 32779

The registered agent in charge thereof is:

Dawn L. Bender

3. The Corporation shall have perpetual existence.

**124 W. York Ct
Longwood, FL 32779**

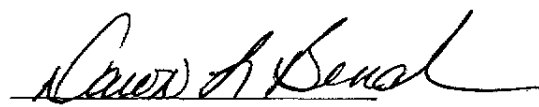
4. The purpose of the corporation is: to conduct general business under the laws of the State of Florida.

5. The corporation is authorized to issue capital stock to the extent of 100 shares of Class 1 common stock, par value \$0.01. All 100 shares shall be held exclusively by Dawn L. Bender.


6. The Board of Directors is authorized and empowered to make, alter, amend and rescind the By-Laws of the corporation, but By-Laws made by the Board may be amended, repealed and altered, by the stockholders.

7. The name and address of the initial Board of Directors are as follows:

NAME	ADDRESS	SIGNATURE
------	---------	-----------

Dawn L. Bender President	124 W. York Ct Longwood, FL 32779	
-----------------------------	--------------------------------------	---------------------------------------------------------------------------------------

8. The name and address of the incorporator is as follows:

Dawn L. Bender	124 W. York Ct Longwood, FL 32779	
----------------	--------------------------------------	---------------------------------------------------------------------------------------

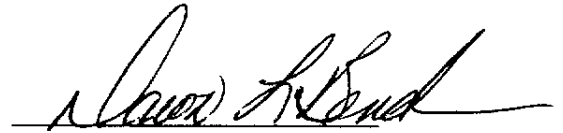
9. The name and address of the registered agent is as follows:

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

05 AUG - 8 PM 12:33

FILED

Dawn L. Bender 124 W. York Ct
Longwood, FL 32779



10. Acknowledgements:

ACKNOWLEDGEMENT

As to Dawn L. Bender

STATE OF NEW JERSEY
COUNTY OF

The forgoing instrument was acknowledged before me this 30th day of July, 2005,
by _____,
who is personally known to me _____ or who has produced DL as
identification and who did take an oath.

SEAL

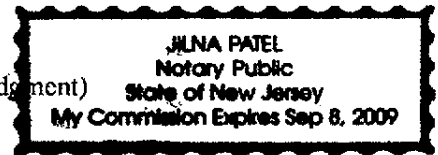
J Patel (Signature of person taking oath)

JUNA PATEL (Name of officer taking acknowledgment)

Sr. CR. (Title or Rank)

(Serial Number, if any)

(Serial Number, if any)



ACKNOWLEDGEMENT STATEMENT OF REGISTERED AGENT

I, Dawn L. Bender, 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 Chapter 607, Florida Statutes, and as registered agent accept the responsibilities and
obligations set forth therein.


Dawn L. Bender