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(Requestor's Name)				
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(Business Entity Name)				
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TRANSMITTAL LETTER

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

SUBJECT: William	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the arti	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 PPY REQUIRED
FROM: Wil	liam Bailey		
	Name	(Printed or typed)	.
	1712 West Page Rd	Address	-
	Tallahassee FL 32305 City,	State & Zip	Taring a traini ge,
	&SV- D 66- C	952 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)

FILED

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

William Bailey Framing Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 1712 West Page Rd
Tallahassee, FL 32305

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Professional framing

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):

William Bailey, President 1712 West Page Rd Tallahassee, FL 32305

ARTICLE VI REGISTERED AGENT

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

William Bailey 1712 West Page Rd Tallahassee, FL 32305

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

William Bailey 1712 West Page Rd Tallahassee, FL 32305

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

-3-05

Date