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05 DEC 29 AM 10:33  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

J. Shivers DEC 30 2005

## COVER LETTER

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

**SUBJECT:** Bruce Edward Hudson 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:** Bruce Edward Hudson  
Name (Printed or typed)

6913 Outlaw Ct #105  
Address

Orlando, FL 32818  
City, State & Zip

407-574-4279  
Daytime Telephone number

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**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:

Bruce Edward Hudson Enterprises Inc.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

6913 Outlaw Ct #105 Orlando FL 32818

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Conducting business with the sole purpose of monetary profit.

**ARTICLE IV SHARES**

The number of shares of stock is:

1

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

List name(s), address(es) and specific title(s):

Chief Executive Officer/Director Bruce Edward Hudson  
6913 Outlaw Ct #105 Orlando FL 32818

**ARTICLE VI REGISTERED AGENT**

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

Bruce Edward Hudson  
6913 Outlaw Ct #105 Orlando FL 32818

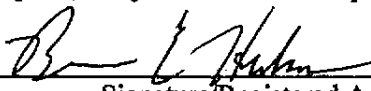
**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

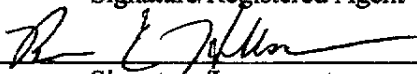
Bruce Edward Hudson  
6913 Outlaw Ct #105 Orlando FL 32818

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*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

12/24/05  
Date

  
\_\_\_\_\_  
Signature/Incorporator

12/24/05  
Date

05 DEC 29 AM 10:33  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA