

PD6000042315

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

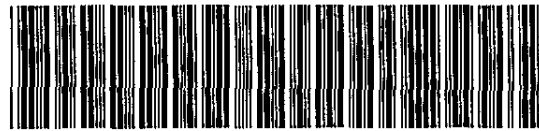
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



200068302422

03/23/06--011111--001 \*18.15

FILED  
06 MAR 23 PM 4:10  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

MRS  
3/23

## COVER LETTER

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

SUBJECT: Burst Commerce, 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: Matthew A. McGrimmon  
Name (Printed or typed)

5623 Killian Path  
Address

Wesley Chapel, FL 33543  
City, State & Zip

813-907-7222  
Daytime Telephone 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:

Burst Commerce, Inc

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/ mailing address is:

5623 Killian Peth.  
Wesley Chapel, FL 33543

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

E-Commerce

**ARTICLE IV SHARES**

The number of shares of stock is:

1,000,000 - 1 million

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

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

Matt McCrimmon - 5623 Killian Peth. Wesley Chapel, FL 33543 - Dir  
Thomas McCrimmon - 5623 Killian Peth. Wesley Chapel, FL 33543 - Dir  
Dare Law - 1954 Thornhill Rd. Apt #104. Wesley Chapel, FL 33543 - Dir

**ARTICLE VI REGISTERED AGENT**

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


Matthew A. McCrimmon  
5623 Killian Peth  
Wesley Chapel, FL 33543

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Matthew McCrimmon  
5623 Killian Peth  
Wesley Chapel, FL 33543

\*\*\*\*\*  
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

3/20/06  
\_\_\_\_\_  
Date

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

3/20/06  
\_\_\_\_\_  
Date

**FILED**

06 MAR 23 PM 4:10

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA