PO6000099709

| · · · · · · · · · · · · · · · · · · · | | |
|---------------------------------------|---------------------|-------------|
| (F | Requestor's Name) |) |
| . (/ | Address) | |
| (/ | Address) | |
| - (0 | City/State/Zip/Phon | ne #) |
| PICK-UP | ☐ WAIT | MAIL |
| (F | Business Entity Na | me) |
| 1) | Document Number |) |
| Certified Copies | Certificate | s of Status |
| Special Instructions t | to Filing Officer: | |
| | | |
| | | : |
| | | |
| | | |





900077974439

07/28/06--01040--004 **87.50

OF JUL 28 PH 2: 52

COVER LETTER

ر يو. ا^و.

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

| | (1 KO1 O3LD COID O | RATE MAIND " MIGGI INCES | , DE SCITIA, | |
|-------------------------|------------------------------------|-------------------------------|----------------------------|--|
| | | , | | |
| | | | | |
| Enclosed are an orig | ginal and one (1) copy of the a | articles of incorporation and | a check for: | |
| ☐ \$70.00 | \$78.75 | \$78.75 | \$87.50 | |
| Filing Fee | Filing Fee & Certificate of Status | Filing Fee & Certified Copy | Filing Fee, Certified Copy | |
| | | | & Certificate of | |
| | : | ADDITIONAL CO | Status PY REQUIRED | |
| | | | | |
| | | , 0 | _ | |
| FROM: | BARBARA | DIANE BO | 70 | |
| Name (Printed or typed) | | | | |
| 711 NW 126 AUE | | | | |
| | | Address | | |
| | A A C . | 1.18S 5 | 2227/ | |
| | CORAL SPI | RINGS E | 220+1 | |
| | Carula | _ | • | |
| | (7)4)27 Daytin | 38 9235 | | |
| | | | | |

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) | DIVISION OF CORPORATIONS |
|---|---------------------------------------|
| ARTICLE I NAME | 06 III STATIONS |
| The name of the corporation shall be: | 06 JUL 28 PM 2: 53 |
| BARBARA BOYD INC. | 03 |
| ARTICLE II PRINCIPAL OFFICE | |
| The principal place of business/mailing address is: 411 NW 126 AVE, CORAL SPRI | INGS FE 33071 |
| ARTICLE III PURPOSE The purpose for which the corporation is organized is: FOOTW EAR ACCESSO LIES & APPAREL | |
| ARTICLE IV SHARES The number of shares of stock is: 100 (OUE HOUDLED) | |
| ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): LEO - BALBALA B BOYD | |
| ALL SPRINGS E 33071 | |
| ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the re BARBARA D. BOYI) FILL WW (26 AVE, CORAL SPRIN | |
| ARTICLE VII INCORPORATOR The name and address of the Incorporator is: | |
| | · · · · · · · · · · · · · · · · · · · |
| THI NW 126 AVE, CORAL SPRINGS | > 1c 220 H |
| ***************** | ******** |
| Having been named as registered agent to accept service of process for the above stated certificate, I am familiar with and accept the appointment as registered agent and agree to | |
| (200 and) | 20/20 |
| Signature/Registered Agent | TKOIOS Date |
| 20 Show al | al2 210h |
| Signature Incorporator | |