

P07000031381

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

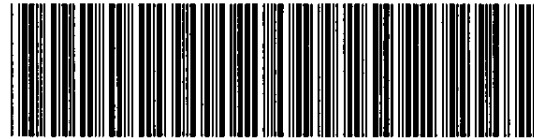
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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03/09/07--01022--005 **60.00

03/09/07--01022--006 **10.00

RECEIVED
07 MAR -9 AM 11:48
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED
2007 MAR -9 PM 12:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. Hampton MAR 12 2007

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

BCM Services of North
Florida, Inc.

Signature _____

Requested by: WL

Date 3/9

Time 11:00

Name _____

Walk-In _____

Will Pick Up _____

☒ Art of Inc. File _____

_____ LTD Partnership File _____

_____ Foreign Corp. File _____

_____ L.C. File _____

_____ Fictitious Name File _____

_____ Trade/Service Mark _____

_____ Merger File _____

_____ Art. of Amend. File _____

_____ RA Resignation _____

_____ Dissolution / Withdrawal _____

_____ Annual Report / Reinstatement _____

_____ Cert. Copy _____

☒ Photo Copy _____

_____ Certificate of Good Standing _____

_____ Certificate of Status _____

_____ Certificate of Fictitious Name _____

_____ Corp Record Search _____

_____ Officer Search _____

_____ Fictitious Search _____

_____ Fictitious Owner Search _____

_____ Vehicle Search _____

_____ Driving Record _____

_____ UCC 1 or 3 File _____

_____ UCC 11 Search _____

_____ UCC 11 Retrieval _____

Courier _____

ARTICLES OF INCORPORATION
OF
BCM SERVICES OF NORTH FLORIDA, INC.

ARTICLES OF INCORPORATION OF THE UNDERSIGNED, DESIRING TO FORM A CORPORATION UNDER THE STATE OF FLORIDA BUSINESS CORPORATION ACT, HEREBY ADOPT THE FOLLOWING ARTICLES OF INCORPORATION.

ARTICLE 1: NAME

THE NAME OF THE CORPORATION SHALL BE:

BCM SERVICES OF NORTH FLORIDA, INC.

ARTICLE 2: PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS AND MAILING ADDRESS OF THIS CORP. SHALL BE:

1725 CASSAT AVE, JACKSONVILLE, FL. 32210

ARTICLE 3: CAPITAL STOCK

THE NUMBER OF SHARES TO BE ISSUED FOR THIS CORP. WILL BE ONE HUNDRED (100) HAVING A PAR VALUE OF ONE DOLLAR PER SHARE. WITH EACH OF THE FOREGOING OFFICERS OWNING:

ROBERT C QUINNEY JR - 51 SHARES (51 %)
CHARLES B ROTH - 49 SHARES (49 %)

ARTICLE 4: INITIAL REGISTERED AGENT AND ADDRESS

THE NAME AND ADDRESS OF THE REGISTERED AGENT IS:

CHARLES B ROTH
1725 CASSAT AVE
JACKSONVILLE, FL. 32210

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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ARTICLE 5: INCORPORATOR

THE NAME AND ADDRESS OF THE INCORPORATOR THESE ARTICLES IS:

CHARLES B ROTH- 1725 CASSAT AVE, JAX. FL, 32210

ARTICLE 6: OFFICERS

THE INITIAL NAME AND ADDRESS OF EACH OFFICER IS:

PRESIDENT AND CEO- ROBERT C QUINNEY JR.
200 MICHAEL DR, ST. AUGUSTINE, FL. 32086

CHAIRMAN, SECRETARY / TREASURER - CHARLES B ROTH
1725 CASSAT AVE, JAX, FL. 32210

THE UNDERSIGNED HAS EXECUTED THESE ARTICLES OF INCORPORATION
THIS 20th DAY OF FEBRUARY, 2007



CHARLES B ROTH- INCORPORATOR

SUBSCRIBED BEFORE ME THIS 20th DAY OF FEBRUARY 2007



SIGNATURE OF NOTARY PUBLIC, STATE OF FL.



CERTIFICATE OF DESIGNATION OF REGISTERED AGENT / REGISTERED
OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FL. STATUTE, THE
MENTIONED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE
OF FL. SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE
REGISTERED OFFICE / AGENT, IN THE STATE OF FLORIDA.

- 1) THE NAME OF THE CORPORATION IS : BCM SERVICES OF NORTH FLORIDA, INC.
- 2) THE NAME AND ADDRESS OF THE REGISTERED AGENT IS :
CHARLES B ROTH, 1725 CASSAT AVE., JACKSONVILLE, FL. 32210

HAVING BEEN NAMED AS A REGISTERED AGENT AND TO ACCEPT SERVICE
OF PROCESS FOR THE ABOVE STATED CORP. AT THE PLACE DESIGNATED
IN THE CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS
REGISTERED AGENT AND AGREE TO COMPLY WITH ALL THE PROVISIONS
OF THE STATUTE RELATING TO THE PROPER AND COMPLETE
PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT
THE OBLIGATIONS OF MY POSITION AS THE REGISTERED AGENT.



CHARLES B ROTH



SIGNATURE OF NOTARY PUBLIC, STATE OF FL.

