P070000 5447

(Requestor's N	ame)		
(Address)			
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(City/State/Zip/Phone #)			
PICK-UP WA	T MAIL		
(Business Entit	y Name)		
(Document Number)			
Certified Copies Certif	icates of Status		
Special lucturations to Filips Office			
Special Instructions to Filing Officer:			
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07 MAY 10 PH 3: 57
SECRETARY OF STATE
AND AHASSEE, FLORIDA

1-2-1521

COVER LETTER

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

SUBJECT:	The Halcy	on Corporati	ion
	(PROPOSED CORPORA	ATÊ NAME – <u>MÛST ÎNCL</u>	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the art	ticles 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 PY REQUIRED
FROM: The Haleyn Corporation Name (Printed of typed) 390 S Tyndall Parkway, PMB 268 Address			
	Panama City, F City 850-215 Daytime	2 32 404 5 State & Zip - 3609 Telephone number	

NOTE: Please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 5, 2007

THE HALCYON CORPORTION 390 S TYNDALL PARKWAY, PMB 268 PANAMA CITY, FL 32404

SUBJECT: THE HALCYON CORPORATION

Ref. Number: W07000010934

We have received your document for THE HALCYON CORPORATION and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

A corporation may not serve as its own registered agent. Please designate an individual or another active entity filed or registered with this office, having a Florida street address.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6962.

Valerie Herring Document Specialist New Filing Section

Letter Number: 707A00015581

ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	FILED		
ARTICLE I NAME The name of the corporation shall be:	07 HAY 10 PM 3: 57		
Haleyon Blue corporation	SECRETARY OF STATE TALLAHASSEE, FLORIDA		
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 3905. Tyndall Pkwy, PMB 268 Panama City, FL 32404 ARTICLE III PURPOSE The purpose for which the corporation is organized is: Business Management			
ARTICLE IV SHARES The number of shares of stock is: 100			
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): Debra B Pickett - President JANAN Pickett - V. President John Pickett - Chief Financial Officer			
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:			
7716 Shadow Bay Drive Panama City, FL 32404 Debra B Pickett ARTICLE VII INCORPORATOR			
The <u>name and address</u> of the Incorporator is:			
Panama CI44, FL 32404	3 Pickett ********		
Having been named as registered agent to accept service of process for the above stated of certificate, I am familiar with and accept the appointment as registered agent and agree to a Signature Registered Agent Signature Incorporator	orporation at the place designated in this		