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(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
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SECHETARY OF STATE

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

	(PROPOSED CORPORA	NIR NAME - MOST INCL	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the art	icles of incorporation and	l 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 DPY REQUIRED
FROM:	BARBARA M BROWN Name (Printed or typed)		
	234 SOUTHEAST 827 ST Address		
	OLD TOWN, FL 32680 City, State & Zip		
	352-542-9595 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:

BII Marketing, inc

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA:

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

234 SOUTHEAST 827 ST OLD TOWN, FL 32680

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The purpose of the corporation is to conduct any lawful purpose or purposes.

ARTICLE IV SHARES

The number of shares of stock is:

100 shares of common stock.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

BARBARA M BROWN PRESIDENT, TREASURER BARBARA L GRANGER VICE PRESIDENT, SECRETARY

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

BARBARA M BROWN 234 SOUTHEAST 827 ST OLD TOWN, FL 32680

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

BARBARA M BROWN 234 SOUTHEAST 827 ST OLD TOWN, FL 32680

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

Date

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Signature/Incorporator

Date 1