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COVER LETTER

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

SUBJECT:		pck 117 Cor	
	(PROPOSED CORPORA	ate name <u>– must inci</u>	LUDE SUFFIX) S CO
Enclosed are an orig	inal and one (1) copy of the arti	cles of incorporation and	l a check for:
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:	Michael NA Name	DSAU (Printed or typed)	
	8293 BLUE	Cypus Dri	/4
	Lake Worth	1 fr 33467	·
	(Sol) 94	7 -7 /6 / Telephone number	
		86 -0051/Cell	

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

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)		
ARTICLE I NAME The name of the corporation shall be: NADEAU BLACKPOCK 117 Corporation	•	
The principal street address and mailing address, if different is: 8293 Blue Cypen Dive (ale Worth & 33467) ARTICLE III PURPOSE The purpose for which the corporation is organized is:		
ARTICLE IV SHARES The number of shares of stock is: 1000	00 DEC 31 PM SECRETARY OF TALLAHASSEE, FI	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): Michael NADEAU, president Kristne Nadeau, Vire president	M 3: 12 STATE FLORIDA	
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered Registered Devices (P.O. Box NOT acceptable) of the registered Regi	agent is:	***
Having been named as registered agent to accept service of process for the above stated corporate certificate, I am familiar with and accept the appointment as registered agent and agree to act in this Signature/Registered Agent Signature/Incorporator		ed in this