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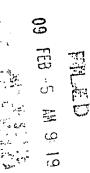
(Requestor's Name)					
(Address)					
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(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
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COVER LETTER

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

UBJECT: MATT	HOWARD BAIL B	ONDS, INC.		
	(PROPC	OSED CORPORA	TE NAME – <u>MUST INC</u>	LUDE SUFFIX)
			•	
•				
closed are an ori	ginal and one (1)	copy of the artic	les of incorporation and	d a check for:
D 670.00 D 670.75			D 670 75	[7] 697 50
\$70.00	☐ \$78.75		☐ \$78.75	☑ \$87.50
Filing Fee	Filing Fee & Certificate	of Status	Filing Fee & Certified Copy	Filing Fee, Certified Copy
	e Commond	OI Status	ac certified copy	& Certificate of
				Status
			ADDITIONAL COPY REQUIRED	
FROM:	PAMELA R. HO	WARD Name ((Printed or typed)	·
			• • •	
	1759 St. Mary A	venue		
			Address	
		•		
	PENSACOLA	FL 32501		
		City,	State & Zip	· · · · · · · · · · · · · · · · · · ·
	850-432-9800			
	555- 1 52-5550	Daytime T	elephone 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:

MATT HOWARD BAIL BONDS, INC.

ARTICLE II PRINCIPAL OFFICE

The principal <u>street</u> address and mailing address, if different is: 1759 ST MARY AVENUE PENSACOLA FL 32501

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: FOR PROFIT

ARTICLE IV SHARES

The number of shares of stock is:

100 SHARES COMMON STOCK

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

MATTHEW L. HOWARD 13875 TIMBER CREEK DR CANTONMENT FL 32533 PRES/SEC

PAMELA R. HOWARD 13875 TIMBER CREEK DR CANTONMENT FL 32533 V/PRES / TREAS

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

PAMELA R. HOWARD 13875 TIMBER CREEK DR CANTONMENT FL 32533

ARTICLE VII INCORPORATOR

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

Signature/Incorporator

MATTHEW L. HOWARD 13875 TIMBER CREEK DR CANTONMENT FL 32533

**************	**********
Having been named as registered agent to accept service of process for the above certificate, I am familiar with and accept the appointment as registered agent and	
Somela & Horeau C	02/02/09
Signature/Registered Agent	Date
272	02/02/09

this

Date