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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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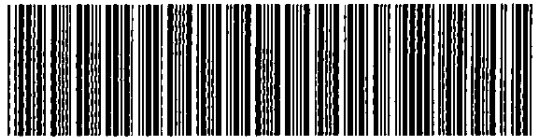
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Shivers AUG 10 2009

Law Offices
Smith, White, Sharma & Halpern

A Professional Association

Lion's Gate Manor
1126 Ponce de Leon Avenue, NE
Atlanta, Georgia 30306
(404) 872-7086
Fax/Telecopier
(404) 892-1128

Furman Smith, Jr., P.C.
Larry James White, P.C.
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Jeannette E. Freeman
Kenneth I. Sokolov
Teri Ellis Brown

Of Counsel:
Benjamin P. Erlitz
Brian Spears

August 3, 2009

Department of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

Re: Belarmina, Inc.

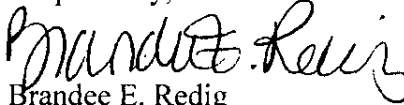
Dear Sir/Madam:

Enclosed herewith please find the following:

1. Cover letter;
2. Articles of Incorporation;
3. Check in the amount of \$70.00.

Please return a file stamped copy in the envelope provided.

Respectfully,



Brandee E. Redig
Assistant to Larry James White

/ber

Enclosures

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: Belarmina, Inc.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☒ \$70.00 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: Larry James White

Name (Printed or typed)

1126 Ponce de Leon Avenue NE

Address

Atlanta, GA 30306

City, State & Zip

(404) 872-7086

Daytime Telephone number

bredig@smithwhitelaw.com

E-mail address: (to be used for future annual report notification)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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:

Belarmina, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

225 E Robinson Street, Suite 240
Orlando, FL 32801

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Management

ARTICLE IV SHARES

The number of shares of stock is:

1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Gerald L. Connet, Jr.
225 E Robinson Street, Suite 240
Orlando, FL 32801

ARTICLE VI REGISTERED AGENT

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

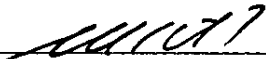
Gerald L. Connet, Jr.
225 E Robinson Street, Suite 240
Orlando, FL 32801

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Gerald L. Connet, Jr.
225 E. Robinson Street, Suite 240
Orlando, FL 32801

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

8-02-09

Date



Signature/Incorporator

8-02-09

Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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