

P09000078755

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

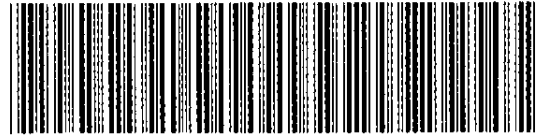
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800160929778

09/22/09--01014--017 **78.75

RECEIVED
09 SEP 22 PM 1:13
FILED
09 SEP 22 PM 1:16
DEPT. OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Shivers SEP 22 2009

COVER LETTER

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

SUBJECT: NBP CENTER, 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: LAW OFFICE OF NICOLE VALERIE JOHNSON, P.A.
Name (Printed or typed)

2866 WATERBROOK WAY

Address

TALLAHASSEE, FLORIDA 32312

City, State & Zip

850 - 727 - 4128

Daytime Telephone number

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

09 SEP 22 PM 1:16

FILED

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

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a for profit corporate entity under Florida Statutes, Chapter 607 and or Chapter 621, adopt(s) the following Articles of Incorporation.

ARTICLE I

The name of this corporation shall be: **NBP CENTER, INC.**

ARTICLE II

The principal place of business address is: **5408 TOURAIN DRIVE, SUITE B
TALLAHASSEE, FLORIDA 32308**

The mailing address of corporation is: **P.O. BOX 3465
THOMASVILLE, GA 31799**

ARTICLE III

The purpose for which this organization is formed: **FOR ANY AND ALL LAWFUL
PURPOSE**

ARTICLE IV

The number of shares of stock is: **100**

ARTICLE V

The Initial Directors are as follows:

**Title: DIRECTOR
JALYSA SMITH
P.O. BOX 3465
THOMASVILLE, GA 31799**

The Initial Officers are as follows:

**Title: PRESIDENT
JALYSA SMITH
P.O. BOX 3465
THOMASVILLE, GA 31799**

FILED
09 SEP 22 PM 1:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VI

The name and Florida address of the registered agent is:

**LAW OFFICE OF NICOLE VALERIE JOHNSON, P.A.
2866 WATERBROOK WAY
TALLAHASSEE, FLORIDA 32312**

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 of Registered Agent:

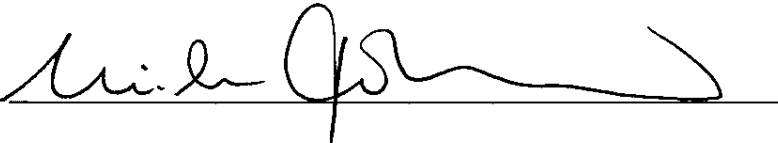


ARTICLE VII

The name and address of the Incorporator is:

**NICOLE VALERIE JOHNSON, ATTORNEY AT LAW
LAW OFFICE OF NICOLE VALERIE JOHNSON, P.A.
2866 WATERBROOK WAY
TALLAHASSEE, FLORIDA 32312**

Signature of Incorporator:



FILED
09 SEP 22 PM 1:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA