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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

EP 9/24/09

COVER LETTER

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

SUBJECT: B.T. Group Investigations, 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
Filing Fee

☒ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

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

ADDITIONAL COPY REQUIRED

FROM: Bonnie Parks / Terrence Guillory
Name (Printed or typed)

4505 Brentwood Ave.
Address

JACKSONVILLE, FLA. 32206
City, State & Zip

904-945-2255 / 904-333-8383
Daytime Telephone number

bparks3828@aol.com / TDGDPD5755@aol.com
E-mail address: (to be used for future annual report notification)

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:

B.T. GROUP INVESTIGATIONS, INC.

ARTICLE II PRINCIPAL OFFICE

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

4505 BRENTWOOD AVE. SUITE # 2
JACKSONVILLE, FLA. 32206

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

PRIVATE INVESTIGATION

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

TERRENCE GUILLORY 4505 BRENTWOOD AVE # 2 President
JACKSONVILLE, FLA. 32206
BONNIE PARKS 209 TROUT RIVER DRIVE Vice President
JACKSONVILLE, FLA. 32208

ARTICLE VI REGISTERED AGENT

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

Terrence Guillory
4505 BRENTWOOD AVE. # 2
JACKSONVILLE, FLA. 32206

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

BONNIE PARKS
209 TROUT RIVER DR.
JACKSONVILLE, FLA. 32208

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

Terrence Guillory
Signature/Registered Agent
Bonnie Parks
Signature/Incorporator

9-22-09
Date
9-22-09
Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA