

PO9000089176

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

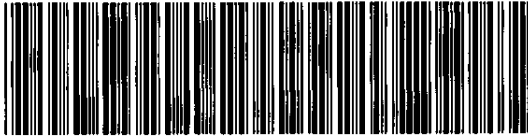
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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10-28-09

COVER LETTER

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

SUBJECT: Buck Lake Institute, 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: L. Jerome Ashford
Name (Printed or typed)

1026 Walden Road
Address

Tallahassee, FL 32317
City, State & Zip

850.445.1038
Daytime Telephone number

ashfordinc@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: BUCK LAKE INSTITUTE, INC

ARTICLE II PRINCIPAL OFFICE

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

1026 WALDEN ROAD
TALLAHASSEE, FL 32317

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

HEALTH SYSTEM RESEARCH, DEVELOPMENT AND
EDUCATION

ARTICLE IV SHARES

The number of shares of stock is: 35

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

L. JEROME ASHFORD, PRESIDENT + CEO

ARTICLE VI REGISTERED AGENT

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

L. JEROME ASHFORD
1026 WALDEN RD
TALLAHASSEE, FL. 32317

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ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

L. JEROME ASHFORD
1026 WALDEN ROAD
TALLAHASSEE, FL 32317

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

L. Jerome Ashford
Signature/Registered Agent

10/26/2009
Date

L. Jerome Ashford
Signature/Incorporator

10/26/2009
Date

L. JEROME ASHFORD