

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H10000272351 3)))



H100002723513ABCV

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : YOUR CAPITAL CONNECTION, INC.
Account Number : I20000000257
Phone : (850) 224-8870
Fax Number : (850) 222-1222

****Enter the email address for this business entity to be used for annual report mailings. Enter only one email address please.**

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
Better Marketing Development Inc

Certificate of Status	1
Certified Copy	0
Page Count	01
Estimated Charge	\$78.75

FILED
10 DEC 20 AM 9:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
10 DEC 20 PM 1:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

Ps 12/20/10

DEC. 20. 2010 11:44AM

CAPITAL CONNECTION

NO. 2704 P. 2

FILED

DEC 20 AM 9:20

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Prof)

ARTICLE I NAME Better Marketing Development Inc
The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE
Principal street address
15709 Waxweed Ave
Springhill Florida 34610

Mailing address, if different is:

Same

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
Lead generation

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Jonathan Barnhisel President
Address: 15709 Waxweed Ave
Springhill Florida 34610

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Jonathan Barnhisel
Address: 15709 Waxweed Ave
Springhill Florida 34610

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Jonathan Barnhisel
Address: 15709 Waxweed Ave
Springhill Florida 34610

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

Required Signature/Registered Agent

Date

12-20-2010

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in § 817.155, F.S.

Required Signature/Incorporator

Date

12-20-2010