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(Requestor's Name)				
(Address) (Address)	900194055899			
(City/State/Zip/Phone #)	02/14/1101016026 **87.50			
(Business Entity Name)				
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11 2 15 14 21112:12 RECEIVED CORPORATIONS

COVER LETTER

Department of State New Filing Section **Division of Corporations** P. O. Box 6327 Tallahassee, FL 32314

SUBJECT: Big Harry Deals, Inc. (PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

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

•	75 ng Fee ertificate of Status	\$78.75 Filing Fee & Certified Copy	Filing Fee, Certified Copy & Certificate of Status
	ADDITIONAL COPY REQUIRED		

FROM: Elizabeth Craven

Name (Printed or typed)

115 Allamanda Drive

Address

Lakeland, FL 33803

City, State & Zip

863-802-5043

Daytime Telephone number

liz@proadmedia.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 Big Harry Deals, Inc.

The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal <u>street</u> address <u>115 Allamanda Drive</u> Lakeland, FL 33803 Mailing address, if different is: PO Box 25017 Lakeland, FL 33802

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The purpose of this corporation is to transact lawful business in the State of Florida.

ARTICLE IV SHARES

The number of shares of stock is: This corporation is authorized to sell 7500 shares of One Dollar (\$1.00) par value common stock which shall be designated "Common Shares."

ARTICLE V	INITIAL OFFICERS AND/OR DIRECT	ORS	
Name and Ti	tle: Elizabeth A. Craven/Vice Preside	ent Name and Title:	
Address:	115 Allamanda Drive	Address:	
	Lakeland, FL 33803		
Name and Ti	itle: Wesley A_Craven/President	Name and Title:	
Address:	115 Allamanda Drive		
	Lakeland, FL 33803	<u> </u>	· · · · · · · · · · · · · · · · · · ·
Name and Ti	tlc:	Name and Title:	
Address:		Address:	
	·····		
ARTICLE VI	REGISTERED AGENT		العميم المحمد الم المحمد ال
The name and Flo	rida street address (P.O. Box NOT acceptable	e) of the registered agent is:	
Name:	Elizabeth A. Craven		
Address:	115 Allamanda Drive		9 L Q
	Lakeland, FL 33803		
ARTICLE VII	INCORPORATOR		NED PH 12:12 ORPORATIONS
	Iress of the Incorporator is:		9 73 19
Name:	Elizabeth A. Craven		
Address:	115 Allamanda Drive		10 2
	Lakeland, FL 33803		0

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

02/11/2011 Required Signature/Registered Agent Date

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 s.817.155, F.S.

Signature/Incorporator

02/11/2011 Date