

P110000075542

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

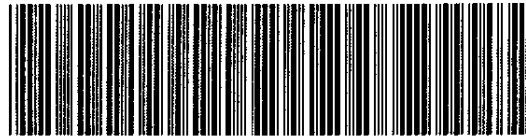
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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08/22/11--01024--015 \*\*70.00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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7/26/11  
1:00

## COVER LETTER

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

**SUBJECT: Bigelow Hill, 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: Sharon L Gambill

Name (Printed or typed)

850 Ft. Pickins Rd Unit 1210

Address

Pensacola Beach, FL 32561

City, State & Zip

850-261-4224

Daytime Telephone number

sharon.gambill@att.net

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**

Bigelow Hill, Inc.  
The name of the corporation shall be:

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
850 Ft. Pickins Rd Unit 1210  
Pensacola Beach, FL 32561

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:  
E-commerce, Online Products and Services

**ARTICLE IV SHARES**

The number of shares of stock is: 100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Sharon L Gambill, Director  
Address: 850 Ft. Pickins Rd Unit 1210  
Pensacola Beach, FL 32561

Name and Title: James R Gambill, Director  
Address: 850 Ft. Pickins Rd Unit 1210  
Pensacola Beach, FL 32561

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: Sharon L Gambill  
Address: 850 Ft. Pickins Rd Unit 1210  
Pensacola Beach, FL 32561

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Sharon L Gambill  
Address: 850 Ft. Pickins Rd Unit 1210  
Pensacola Beach, FL 32561

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

Sharon L Gambill  
Required Signature/Registered Agent

8/18/11  
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.

Sharon L Gambill  
Required Signature/Incorporator

8/18/11  
Date

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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