

NOV. 28 2011 11:51AM

CAPITAL CONNECTION

NO. 790

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P11000101423

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.

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To:

Division of Corporations  
Fax Number : (850) 617-6391

From:

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

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11 NOV 28 AM 10:21  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

Email Address: \_\_\_\_\_

FLORIDA PROFIT/NON PROFIT CORPORATION

IBNA Inc.

Certificate of Status	1
Certified Copy	1
Page Count	02
Estimated Charge	\$87.50

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TALLAHASSEE, FLORIDA

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Corporate Filing Menu

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MRD 11/29

**COVER LETTER**

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

**SUBJECT:** IBNA 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:** Collin Bennett

Name (Printed or typed)

757 S.E. 17th Street #300

Address

Fort Lauderdale FL, 33316

City, State & Zip

954-815-6346

Daytime Telephone number

[captaincollin@gmail.com](mailto:captaincollin@gmail.com)

E-mail address: (to be used for future annual report notification)

**NOTE:** Please provide the original and one copy of the articles.

NOV. 28. 2011 11:51AM

CAPITAL CONNECTION

NO. 7905 P. 2



November 23, 2011

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

YOUR CAPITAL CONNECTION, INC.

SUBJECT: IBNA INC.  
REF: W11000059355

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document submitted does not meet legibility requirements for electronic filing. Please do not attempt to refax this document until the quality has been improved.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

If you have any further questions concerning your document, please call (850) 245-6973.

Claretha Golden  
Regulatory Specialist II  
New Filing Section

FAX Aud. #: H11000276380  
Letter Number: 111A00026499

P.O. BOX 6327 - Tallahassee, Florida 32314

**ARTICLES OF INCORPORATION**

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

**ARTICLE I NAME**

IBNA Inc.

The name of the corporation shall be:

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

757 S.E. 17th St. #300  
Fort Lauderdale FL, 33316

Mailing address, if different is:

**ARTICLE III PURPOSE**The purpose for which the corporation is organized is:  
Consulting/Services**ARTICLE IV SHARES**

The number of shares of stock is: 1,000

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

Name and Title: Collin Bennett, President

Address: 757 S.E. 17th St. #300  
Fort Lauderdale FL, 33316

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: Collin Bennett

Address: 757 S.E. 17th St. #300  
Fort Lauderdale FL, 33316**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Collin Bennett

Address: 757 S.E. 17th St. #300  
Fort Lauderdale FL, 33316

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

21 November 2011

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.



Required Signature/Incorporator

21 November 2011

Date

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11 NOV 28 AM 10:21  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA