

P11000103678

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Certificates of Status _____

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Effective Date Jan. 03 2012

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T. Burch DEC 6 2011

COVER LETTER

NOV. 30, 2011

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

SUBJECT: BRIDGEPRO CONNECT, 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

NOTE EFFECTIVE FILING DATE
OF JANUARY 3, 2012 PER ART. VIII.

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: J. STEVEN HUDSON
Name (Printed or typed)

14280 MILITARY TRAIL, #6807
Address

DELRAY BEACH, FL 33482
City, State & Zip

351-414-9545
Daytime Telephone number

BRIDGEPROCONNECT@GMAIL.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: BRIDGE PRO CONNECT, INC.

ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address

14280 MILITARY TRAIL #6807
DELRAY BEACH, FL 33482

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Effective Date Jan. 02, 2012

TO RENDER SERVICES TO BRIDGE PROFESSIONALS, IN FACILITATING COORDINATION, SCHEDULING, RELATIONSHIP-BUILDING WITH CLIENTELE FOR SERVICES (PLAYERS, COMMUNITY ASSOCIATIONS, CRUISE LINES, BY WAY OF EXAMPLE ONLY), AND TO ENTER INTO CONTRACTS AND CARRY ON ACTIVITY NECESSARY OR INCIDENTAL TO FURTHER THE PURPOSE OF THE CORPORATION, ALL IN ACCORDANCE WITH POWERS GRANTED BY GOVERNING FLORIDA STATUTES AS AMENDED FROM TIME TO TIME.

ARTICLE IV SHARES

The number of shares of stock is: 1,000 SHARES, COMMON, WITH NO PAR VALUE PER SHARE.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: STEVE HUDSON ~~MD~~ / ~~PT~~ / ~~LS~~
Address: 13207 MAHOGANY DRIVE
BOYNTON BEACH, FL
33436

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: STEVEN HUDSON
Address: 13207 MAHOGANY DRIVE
BOYNTON BEACH, FL 33436

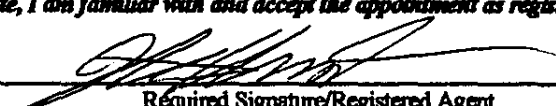
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: STEVEN HUDSON
Address: 13207 MAHOGANY DRIVE
BOYNTON BEACH, FL 33436

ARTICLE VIII:
EFFECTIVE DATE OF THE
CORPORATION SHALL BE
JANUARY 2, 2012.

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

Nov. 29, 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.817.153, F.S.


Required Signature/Incorporator

Nov. 29, 2011
Date