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01/30/12--01026-003 SECKETARY OF S.54T TALLAHASSEE, FLORE

J. Shivers JAN 3 1 2012

## **COVER LETTER**

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

SUBJECT: JOHN B FLY SHOP INC (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)			
(PROPOSED CORPORATE NAME – <u>MUST INCLUDE SUFFIX</u> )			
Enclosed are an original and one (1) copy of the articles of incorporation and a check for:			
\$70.00	\$78.75		
Filing Fee Filing Fee & Certificate of Status	Filing Fee,  & Certified Copy  Certified Copy		
& Certificate of Status	& Certified Copy Certified Copy & Certificate of		
•	Status		
ADDITIONAL COPY REQUIRED			
FROM: TAMES M SO	1474		
FROM: JAMES M SMYTH  Name (Printed or typed)			
245 FORTUNA DR. Address			
A			
PBG FL	A 33440 A T		
	State & Zip		
561-234-9334 = 5 Daytime Telephone number = 5			
on the second of			
0),,,,,,,,,			
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: JOHN B FLY	SHOPINC		
PRINCIPAL OFFICE  Principal street address  4326 5.E FD Hwy  STUART  FLA 34997	10 150x 12 - PBG- 334	ess, if different is: 33641 4-10	
The purpose for which the corporation is organized is:			
ARTICLE IV SHARES The number of shares of stock is: 100			
Name and Title: JAMES M SMYTH PRES Address: 245 FORTUNA DE Palm Beach Garders	Name and Title:Address:		
Name and Title: Address:	Address:		
Name and Title:Address:	Address:		
ARTICLE VI REGISTERED AGENT			
The name and Florida street address (P.O. Box NQT acceptable) of	the registered agent is:	Acc 2	
Name: JAMES M SMYTH Address: 245 FORTUNA DR PBG 33410 FLA Palm Beach Cardus		FIL 012 JAN 30 LECKETARY LLAHASSE	
ARTICLE VII INCORPORATOR		C71	
The name and address of the Incorporator is:  Name: TAMBS M 5MYTH		E E	
Address: 245 FORTUNA DR PB6- 33410 FLA	- - -		
Having been named as registered agent to accept service of process this certificate, I am familiar with and accept the appointment as regi	for the above stated corporalistered agent and agree to act i	tion at the place designated in	
James M. M.		Jon 24/12	
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.			
( ) Low of		T 21/212	
Journ 1	<del></del>	Jan 24/2012	