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PICK-UP	☐ WAIT	MAIL		
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Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				
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FILING CANCELLED RETURNED CHECK

03/19/12--01010--001 **70.00

12 MAR 19 PM 1: 38

SECRETARY OF STATE OIVISION OF CORPORATIONS

or 3/20/13

COVER LETTER

-1

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

SUBJECT:	Blissette, Ir)(LUDE SUFFIX)	
Enclosed are an ori	ginal and one (1) copy of the arti	cles of incorporation ar	nd a check for:	7
\$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 OPY REQUIRED	
PD 014	Alexis T.	FVANS		J
FROM:	Name 4021 NW 30+	(Printed or typed) Ter #3 Address) !•
	Lauderdale l	CINO, FL 3	33309_	SECRETA SISION OF THE
_	954- Daytime To	800-1473 elephone number	3	Y OF STATE CORPORATION PM 1: 38
	blissettel E-mail address: (to be used	O COMOII.	COM t notification)	TIONS

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

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ARTICLES OF INCORPORATION

	In compliance with Chapter 607 and		oran FILFO
ARTICLE I NAME	m compliance with chapter our and	roi Chapter 021, 1.5. (110111)	SECRETARY OF STATE DIVISION OF CORPORATION
The name of the corporation sl	hall be: BUSSEHE	Inc.	CURPURATION
ARTICLE II PRINCIF	PAL OFFICE	-) ·	12 MAR 19 PM 1: 38
	cipal street address Tor#3	Mailing address	
	ergole javes,	Tauderda	é laksi
<u>- FL</u>	3500		01
The purpose for which the co			1
To	orporation is organized is: O CONCLUCT BUSING THE STATE OF F	ress in enterra	inivert
SOLEUIC	HAR STATE OF F	ionda	
wrey ii	1 11th Siarcoi		
ARTICLE IV SHARES The number of shares of stock	_		
ARTICLE V INITIAL	OFFICERS AND/OR DIRECTOR	s , -	
Name and Title: Ale	PXIS EYOUD/OWNE	Name and Title: Alex15	Evans /Treasury
Address: 400	iderdale Lairesi	Address: 4031 N	mare USI
	L 33309	FL	33309
Name and Title: ALCX	(15 Evans/secretar	Name and Title:	
Address: 400	11 NW 30Th Ter#3	Address:	
	FL 33309		
Name and Title:		Name and Title:	
Address:		Address:	
			
ARTICLE VI REGISTE	ERED AGENT		
The name and Florida street	address (P.O. Box NOT acceptable) of	the registered agent is:	
	Alexis T. Evons	ζ.	
11001000	rucierclate LKS, F	133309	
ARTICLE VII INCORPO	ORATOR .		
The name and address of the l	Incorporator is:		
Name: A16	31 NIW 30FD 728#3		
iai	iderclare urs, fl.	33309	
Having been named as registe	ered agent to accept service of process	for the above stated corporation	at the place designated in
this certificate, I am familiar w	with and accept the appointment as regi	stered agent and agree to act in t	his capacity
	us Viii	(<i>か10-12</i>
Red	quired Signature/Registered Agent		Date
I submit this document and a	affirm that the facts stated herein are	true. I am aware that the false t	information submitted in a
document to the Department of	of State constitutes a third degree felony	as provided for in s.817.155, F.S	2
(Ala.	in Dun		0-110-12
- SIN	equired Signature/Incorporator	· · · · · · · · · · · · · · · · · · ·	Date