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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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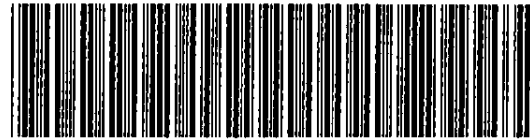
(Business Entity Name)

(Document Number)

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

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## COVER LETTER

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

SUBJECT: **BARGAIN TRADING CO, 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: **PIERRE LYSIUS**  
Name (Printed or typed)

**513 HENRY AVE.**  
Address

**LEHIGH ACRES, FL. 33972**  
City, State & Zip

**239-789-7425**  
Daytime Telephone number

**PIERRELYSIUS@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:

**BARGAIN TRADING CO, INC.**

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

**513 HENRY AVE.**  
**LEHIGH ACRES, FL 33972**

Mailing address, if different is:

**SAME**

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

**TO BUY AND SELL GOODS AND REAL PROPERTIES**

**ARTICLE IV SHARES**

The number of shares of stock is: **100**

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

Name and Title: **PIERRE LYSIUS**

Address: **513 HENRY AVE.**  
**LEHIGH ACRES, FL 33972**

Name and Title: **SOUSE LYSIUS**

Address: **513 HENRY AVE.**  
**LEHIGH ACRES, FL 33972**

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: **PIERRE LYSIUS**

Address: **513 HENRY AVE**  
**LEHIGH ACRES, FL 33972**

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: **PIERRE LYSIUS**

Address: **513 HENRY AVE**  
**LEHIGH ACRES, FL 33972**

*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

**08/22/2012**

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

**08/22/2012**

Date