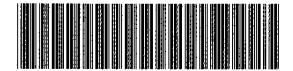
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COVER LETTER

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

SURJECT. 218	94 Bukie, Inc.		
30BJEC1	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the ar	ticles of incorporation an	d 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 CO	OPY REQUIRED
	_	c (Printed or typed)	
13	340 SW 17th Str	eet Address	
B	oca Raton, FL 3	3486	
56	§1-750 - 0005	, State & Zip	
	Daytime 7	Celephone number	
kk	pp@comcast.net		
	E-mail address: (to be use	ed 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)

SECRETARY OF STATE DIVISION OF CORPORATIONS

ARTICLE IV SHARES The purpose for which the corporation is organized is: any and all lawful business. ARTICLE IV SHARES The purpose for which the corporation is organized is: any and all lawful business. ARTICLE IV SHARES The mumber of shares of stock is: 1,000 ARTICLE IV SHARES The mumber of shares of stock is: 1,000 ARTICLE IV SHARES The mumber of shares of stock is: 1,000 ARTICLE IV SHARES The mumber of shares of stock is: 1,000 ARTICLE IV SHARES The mumber of shares of stock is: 1,000 ARTICLE IV ROUND SHARES The mumber of shares of stock is: 1,000 ARTICLE IV ROUND SHARES The mumber of shares of stock is: 1,000 ARTICLE IV ROUND SHARES The mumber of shares of stock is: 1,000 ARTICLE IV ROUND SHARES The mumber of shares of stock is: 1,000 ARTICLE IV ROUND SHARES The mumber of shares of stock is: 1,000 Address: 1,3468 WI The Sharet Address: 1,3468 MIT The Sharet Machaner Share	ARTICLE I	NAME 01904 Pulsis In		DIVISION OF CORPORATIONS
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Principal street address 31894 lates rover Crost 109 Bocs Reton, FL 33433 Bocs Reton, FL 33433 ARTICLE III PURPOSE The purpose for which the corporation is organized is: any and all lawful business. ARTICLE IV SHARES The number of shares of stock is: 1,000 ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS Name and Title: Ment tumon Pronotest Address: 1940 SW 17th Stock Bocs Reton, FL 35469 Name and Title: Ment tumon Pronotest Address: 1940 SW 17th Stock Bocs Reton, FL 35469 Name and Title: And Address: Institute and Title: Address: Address: Address: Address: Address: Address: Institute and Title: Address: Address: Address: Institute and Title: Address: Address: Address: Address: Institute and Title: Address: Institute and Title: Address: Address: Address: Address: Institute and Title: Address: Institute and Title: Address: Institute and Title: Address: Address: Institute and Title: Address: Insti	ARTICLE II	PRINCIPAL OFFICE		WE HOLE ! WIL 2: 21
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ARTICLE III PURPOSE The purpose for which the corporation is organized is: any and all lawful business. ARTICLE IV SHARES The number of shares of stock is: 1,000 ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS Name and Title: Americal Lamon Treas Sery. Address: 1346 SW 17th Shout Book Book Ratter Ft. 33466 Name and Title: Address: 1346 SW 17th Shout Book Book Ratter Ft. 33466 Name and Title: Address: Book Ratter Ft. 33466 Name and Title: Name and Title: Name and Title: Address: Address: Address: Address: Address: Address: Address: Book Ratter Ft. 33466 ARTICLE VI REGISTERED AGENT The name and Fforida drevet address (P.O. Book NOT acceptable) of the registered agent is: Name: Most Lamon Book Ratter Ft. 33466 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: Most Lamon Book Lamon Address: 1340 SW 17th Stoot Book Lamon Address: 1340 SW 17th Stoot Book Ratter Ft. 33466 Book Ratter	\		c/o Mark	- '
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The purpose for which the corporation is organized is: any and all lawful business. ARTICLE IV SHARES The number of shares of stock is: 1,000 ARTICLE V INITIAL OFFICERS AND/OR DIRBCTORS Name and Title: Mark Lemon Procedure Address: 1346 SW 17th Street Boon Fattor FL 33468 Name and Title: Mark Lemon Procedure Address: 1465 SW 17th Street Boon Fattor FL 33468 Name and Title: Address: Addr	_		Boca Ra	ton, FL 33431
The purpose for which the corporation is organized is: any and all lawful business. ARTICLE IV SHARES The number of shares of stock is: 1,000 ARTICLE V INITIAL OFFICERS AND/OR DIRBCTORS Name and Title: Mat Lemon Processer Address: 1340 SW 17th Street Book Ration Ft. 33468 Name and Title: Mark Lemon Processer Address: 140 SW 17th Street Book Ration Ft. 33468 Name and Title: Address:				
The number of shares of stock is: 1,000 ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS Name and Title: Mark terroon Provisions Address: 1340 SW 17th Street Boca Ration Ft. 33468 Name and Title: Mark terroon Provisions Road Ration Ft. 33468 Name and Title: Name and Title: Address: Index Sw 17th Street Boca Ration Ft. 23488 ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Name: Mark terroon Address: 1340 SW 17th Street Boca Ration Ft. 23488 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: Mark terroon Address: 1340 SW 17th Street Boca Ration Ft. 33486 Address: Joseph Trib Street Boca Ratio			d all lawful bus	siness.
Address: 1340 SW 17th Stroot Boca Ration FL 33486 Name and Title: Name and Title: Address: 1340 SW 17th Stroot Boca Ration FL 33486 RETICLE VII INCORPORATOR Be name and address of the Incorporator is: Name: Mask Linson Address: 1340 SW 17th Stroot Boca Ration FL 33486 Retire Mask Linson Boca Ration FL 33486 Reving been named as registered agent to accept service of process for the above stated corporation at the place designate his certificate. I am familiar with and accept the appointment as registered agent and agree to act in this capacity The LASSY BULK THE Address: Date Information submitted incurrent to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.	The number of shar	es of stock is: 1,000 INITIAL OFFICERS AND/OR DIRECTO		dl Bararavia i areas Turas Strata
Name and Title: Address: Name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Name: Mark Lonson Address: 1340 SW 17th Street Boca Raton FL 33486 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: Mark Lonson Address: 1340 SW 17th Street Boca Raton FL 33486 Address: 1340 SW 17th Street Boca Raton FL 3348				
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Name and Title: Address: Name and Title: Address: Name and Title: Address: Name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Name: Name: Mark Lorson Address: 1340 SW 17th Stroot Boca Raton FL 33488 NERTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: Mark Lorson Address: 1340 SW 17th Stroot Boca Raton FL 33488 Name: Mark Lorson Address: 1340 SW 17th Stroot Boca Raton FL 33488 Name: Address: Addres		DOLL REDITTE SCHOOL		BOCH PHIOTEC 33400
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The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Name: Mark Lonson				
The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Name: Mark Lonson				
The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Name: Name			_	
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Boca Raton Fl. 33486 ARTICLE VII INCORPORATOR the name and address of the Incorporator is: Name: Mark Lonson Address: 1340 SW 17th Street Boca Raton Fl. 33488 Idving been named as registered agent to accept service of process for the above stated corporation at the place designate his certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity Required Signature/Registered Agent Submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in accument to the Department of State constitutes a third degree felony as provided for in s. 817.155, F.S.				
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Name: Mark Lenson Address: 1340 SW 17th Street Boca Raton FL 33486 aving been named as registered agent to accept service of process for the above stated corporation at the place designate is certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity Fire 2384 GMM THE Registered Signature Registered Agent Submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted is cument to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.		Boca Raton FL 33486		
The name and address of the Incorporator is: Name: Mark Lonson Address: 1340 SW 17th Street Boca Raton FL 33486 aving been named as registered agent to accept service of process for the above stated corporation at the place designate is certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity FIXE 23894 GIASE THE Roguined Signature/Registered Agent Date submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted incument to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.				
Name: Address: 1340 SW 17th Street Boca Ration FL 33486 Laving been named as registered agent to accept service of process for the above stated corporation at the place designate its certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity Required Signature/Registered Agent Submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted incument to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.	RTICLE VII	INCORPORATOR		
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Address: 1340 SW 17th Street Boca Ration FL 33486 aving been named as registered agent to accept service of process for the above stated corporation at the place designate is certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity Required Signature/Registered Agent Date Submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted incument to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.				
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ris certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity		Boca Raton FL 33486		
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Required Signature/Registered Agent State			1. 1114 F. r.	1/15/15
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Required Signature/Incorporator Date Date	rument to the De	vortment of stage constitutes a third degree felo	ony as provided fo	r in s.817.155, F.S.
Required Signature/Incorporator Date		At the same	, · ·	1/1/2
Required Signature/Incorporator Date	(SHI / FAZ Z1894 (SUNKE LA	a. 1/1/87/2
		Required Signature/Incorporator		Date
	//			′ /

ARTICLES OF INCORPORATION

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

ARTICLE I	NAME		DIVISION OF CORPORATION
The name of the co	opporation shall be: 21894 Bukie, Inc	C.	12 NOV 21 AM 9:51
			35 NOT 21 AM 9:51
ARTICLE II	Principal street address		Mailing address, if different is:
\}	21894 Lake Forest Circle #105	c/o Mark Ler	-
A.	Boca Raton, FL 33433	120 Spanisi	n River Bivd. Ste-K
-		Boca Raton	,FL 33431
-			
ARTICLE III	PURPOSE		
The purpose for w	which the corporation is organized is: any and	all lawful busii	ness.
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ARTICLE IV	SHARES		
The number of sha	ires of stock is: 1,000		
THE IMPRIORI OF SIZE	105 OI SIJOR IS.		
ARTICLE V	INITIAL OFFICERS AND/OR DIRECTO		
Name and T	itle: Mark Lenson President	Name and Title	Annmarie Lenson Treas /Scr'y.
Address:	1340 SW 17th Street	Address:	1340 SW 17th Street
	Boca Raton FL 33486		Boca Raton FL 33488
3.7	P.4	3 T 1 99741 .	
Name and T	ute:	Name and Title	·
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Address:	mrc.	Address:	·
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ARTICLE VI	REGISTERED AGENT		
The name and Fk	orida street address (P.O. Box NOT acceptable)	of the registered ag	ent is:
Name:	Mark Lenson		•
Address:	1340 SW 17th Street		
	Boca Raton FL 33486		
ARTICLE VII	INCORPORATOR		
	dress of the Incorporator is:		
Name:	Mark Lenson		
Address:	\ 1340 SW 17th Street .		
7 1442-055.	Boca Raton FL 33486		
Having been nam	ned as registered agent to accept service of proce	ess for the above sta	ated corporation at the place designated in
this certificate, I a	im familiar with and accept the appointment as i	registered agent and	l agree to act in this capacity
			(. /
(FOR 21894	BUXILTUE	1/18/12
	Required Signature/Registered Agent	<u> </u>	Date
			, /=
	ument and affirm that the facts stated herein a		
	repartment of State constitutes a third degree fel		

Required Signature/Incorporator

Date