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| (Requestor's Name) | | |
|---|--|--|
| (Address) | | |
| (Address) | | |
| (City/State/Zip/Phone #) | | |
| PICK-UP WAIT MAIL | | |
| (Business Entity Name) | | |
| (Document Number) | | |
| (Boodinon) (Boodinon) | | |
| Certified Copies Certificates of Status | | |
| Special Instructions to Filing Officer: | | |
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Office Use Only



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12/27 B W12-63559 From: 9544284830

Page: 1/2

Date: 1/2/2013 9:19:59 PM

COVER LETTER

Revised

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

| SUBJECT: Boys Night Out Live Co. (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 | SL\$78.75 Filing Fee & Certified Copy ADDITIONAL CO | \$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED | |
| FROM: Evin Hagerty Name (Printed or typed) | | | | |

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E-mail address: (to be used for future annual report notification)

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

13 JAN -3 AM 9: 2

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From: 9544284830

Page: 2/2 Date: 1/2/2013 9:19:59 PM

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

| The name of the corporation shall be: Boys Night Out | Live, Co. |
|--|--|
| Principal OFFICE Principal street address 4021 70 10 5400 FL Deportud Beach FL 33442 | Mailing address, if different is: |
| ARTICLE III PURPOSE The purpose for which the corporation is organized is: Professional Endendance of ending | |
| ARTICLE IV SHARES The number of shares of stock is: 100 | |
| Name and Title: Erin Hagerly President Name Address: 4021 10 10 6 54 10 6 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | and Title: Maruin Thompson - Secretorn -1012 Inversely Blud -1012 IDA Loudenty II, EL 33319 |
| Name and Title: Wayne Hood - Vice President Name Address: 4021, N.W. 10 struct Addre Deer reld Brack FL 33442 | |
| Name and Title: Myid Rentok - Director Name Address: 9114 Chambers St. Address Tamorac, FL 33321 | |
| ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the reg Name: + xxexy Address: + you + xxexy Deed-11 Property 33442 | istered agent is: |
| ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: Kelly Hagerty Address: 1902 Lipschikk terrace Desmitted Reach FL 33442 | W-B PHED |
| Having been named as registered agent to accept service of process for the this certificate, I am familiar with and accept the appointment as registered | |
| Required Signature Registered Agent | Date |
| I submit this document and affirm that the facts stated herein are true. I document to the Department of State constitutes a third degree felony as pro- | |