P13000005396

(Requestor's Name)	
(Address)	
(Address)	•
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer: ADDED NUMBER OF SHARES	
ADOBO NUMBER OF SHARES (100) OF STOCK FOR ARTICLE # TV PER TELEPHONE	Ţ
CONVERSATION WITH	
CAROL JENSEN. TO 01/16/	3
Office Use Only	



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13 JAN 15 PH 12: 41
SECRETARY OF STATE
TALLAHASSEE, FLORID.

01/16/13

* COVER LETTER *

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

SUBJECT: Bookmark Cafe SWF Inc. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an orig	inal and one (1) copy of the ar	ticles of incorporation and	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
	* 3	ADDITIONAL CO	

·OM·	Theodore & Carol Jensen
CIVI.	Name (Printed or typed)
	5521 Harbour Preserve Circle
	Address
	Cape Coral, Florida 33914
	City, State & Zip
	239-471-2501
	Daytime Telephone number
	cjensen425@aol.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 NAM The name of the corpora	tion shall be: Bookmark Cafe S	WF Inc.				
	NCIPAL OFFICE Principal street address		Mailing address, if Harbour P) Ir
Fort Myers Be	each, FL 33931	Cape	Coral, FL	3391	4	
ARTICLE III PUR The purpose for which t	POSE he corporation is organized is:	d all profita	able busine	ss		
ARTICLE IV SHA	RES 400			SECKETARY OF ST ALLAHASSEE, FL	13 JAN 15 PM 12: 4	erasene
The number of shares of	TIAL OFFICERS AND/OR DIRECTOR	-	Caral lan	TATE		
	Theodore R. Jensen, Pres		5521 Harbo			- Cir
Address	5521 Harbour Preserve Cir Cape Coral, FL 33914	_ Address:	Cape Cora			
Name and Title:		Name and Title				
Address						
Name and Title:		Name and Title				
Address		Address:				
		-				 · _ _

	ne and Title:	Na		and Title:	Name an
	lress:	Ac		ress	Address .
					-
					ARTICLE VI
	egistered agent is:) of the	Idress (P.O. Box NOT acceptable) of		The name and Fi
			ensen	Carol Jens	Name:
		r	arbour Preserve Cir	5521 Harb	Address:
4			Coral, FL 33914	Cape Cora	
CONTRACT OF STREET	AR		RATOR	II INCORPORATO	ARTICLE VII
Company of the Compan	SS on		corporator is:	l address of the Incorpor	The name and ad
	E C PR		l Jensen	Carol Je	Name:
-	STATE LOR	ir	Harbour Preserve Cir	5521 Ha	Address:
	DE -		e Coral, FL 33914	Cape Co	
gnated in	he above stated corporation at the place designated agent and agree to act in this capacity	register	th and accept the appointment as reg	, I am familiar with and	Having been nam this certificate, I a
	Date		ired Signature/Registered Agent	Required S	
itted in a	I am aware that the false information submitted rovided for in s.817.155, F.S. Date	re true. ony as j	irm that the facts stated herein are State constitutes a third degree felon for the State Signature/Incorporator	ne Department of State of	I submit this document to the L
	the above stated corporation at the place design d agent and agree to act in this capacity 1 8 3 Date am aware that the false information submits	ess for register	Harbour Preserve Cire Coral, FL 33914 ed agent to accept service of process the and accept the appointment as regular to accept the appointment as regular that the facts stated herein are state constitutes a third degree felon acceptance.	5521 Ha Cape Co named as registered age I am familiar with and Required Si tocument and affirm the the Department of State Co	Address: Having been name this certificate, I also a language of the submit this documents.