

P14000041139

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H14000110247 3)))



H140001102473ABCJ

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations  
Fax Number : (850)617-6381

From: Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (850)222-1092  
Fax Number : (850)878-5368

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: \_\_\_\_\_

2014 MAY -8 PM 12:40  
STATE DEPT OF CORP  
DIVISION OF CORPORATIONS

FLORIDA PROFIT/NON PROFIT CORPORATION  
Buttercup Beta Corporation

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

RECEIVED  
14 MAY -8 AM 11:33  
STATE DEPT OF CORP  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

Electronic Filing Menu Corporate Filing Menu Help

1/4

### COVER LETTER

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

**SUBJECT:** BUTTERCUP BETA CORPORATION  
\_\_\_\_\_  
(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:** Thomas J. Healy, Jr.  
\_\_\_\_\_  
Name (Printed or typed)  
  
600 Steamboat Rd.  
\_\_\_\_\_  
Address  
  
Greenwich, CT 06830  
\_\_\_\_\_  
City, State & Zip  
  
203-489-1103  
\_\_\_\_\_  
Daytime Telephone number  
  
Healy@Bessemer.com  
\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
2014 MAY -8 PM 12:40

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

**ARTICLE I NAME** BUTTERCUP BETA CORPORATION

The name of the corporation shall be: \_\_\_\_\_

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

c/o T J Healy, Jr.; Bessemer Trust  
\_\_\_\_\_  
222 Royal Palm Way  
\_\_\_\_\_  
Palm Beach, FL 33480  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Investment

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE IV SHARES** 5000 shares with \$1.00 par value  
The number of shares of stock is: \_\_\_\_\_

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

Name and Title:	Robin B. Martin, President	Name and Title:	Robin B. Martin, Director
Address:	c/o T J Healy, Jr., Bessemer Trust	Address:	c/o T J Healy, Jr., Bessemer Trust
	222 Royal Palm Way		222 Royal Palm Way
	Palm Beach, FL 33480		Palm Beach, FL 33480
Name and Title:	Thomas J. Healy, Jr., Secretary	Name and Title:	Thomas J. Healy, Jr., Treasurer
Address:	c/o T J Healy, Jr., Bessemer Trust	Address:	c/o T J Healy, Jr., Bessemer Trust
	222 Royal Palm Way		222 Royal Palm Way
	Palm Beach, FL 33480		Palm Beach, FL 33480
Name and Title:	Thomas J. Healy, Jr., Director	Name and Title:	
Address:	c/o T J Healy, Jr., Bessemer Trust	Address:	
	222 Royal Palm Way		
	Palm Beach, FL 33480		

FILED  
SECRETARY OF STATE  
DIVISION (COMM.) BUREAU  
2014 MAY -8 PM 12:40

Name and Title: _____	Name and Title: _____
Address _____	Address: _____
_____	_____
_____	_____

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: C T Corporation System

Address: 1200 South Pine Island Road  
Plantation, FL 33324

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Courtney L. Scanlon

Address: 140 Pearl Street, Suite 100  
Buffalo, NY 14202

*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*

By: *Connie Boman* 05/08/2014  
Required Signature/Registered Agent 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.*

*Courtney L. Scanlon* 05/6/2014  
Required Signature/Incorporator Date  
Courtney L. Scanlon