

**P15000006400**

Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
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TALLAHASSEE, FLORIDA

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

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

**FLORIDA PROFIT/NON PROFIT CORPORATION  
BSM SERVICES GROUP, INC.**

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$78.75

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TALLAHASSEE, FLORIDA  
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*MD 1/24*

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

**ARTICLE I NAME:** BSM SERVICES GROUP, INC.  
The name of the corporation shall be:

**ARTICLE II PRINCIPAL OFFICE**  
Principal street address

132 Greenview Street  
Marco Island, Florida 34145

Mailing address, if different is:

P.O. Box 2614  
Marco Island, Florida 34146

**ARTICLE III PURPOSE**  
The purpose for which the corporation is organized is: To transact any lawful business for which corporations may be incorporated under the Florida General Corporation Act.

**ARTICLE IV SHARES** 1,000  
The number of shares of stock is:

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

Name and Title:	Brian S. McMahon, Pres.	Name and Title:	
Address	132 Greenview Street	Address:	
	Marco Island, Florida		
	34145		

Name and Title:		Name and Title:	
Address		Address:	

Name and Title:		Name and Title:	
Address		Address:	

(cont.)

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: Brian S. McMahon  
Address: 132 Greenview Street  
Marco Island, Florida 34145

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Brian S. McMahon  
Address: 132 Greenview Street  
Marco Island, Florida 34145

*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*

Brian S. McMahon  
Required Signature/Registered Agent

1/20/2015  
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.*

Brian S. McMahon  
Required Signature/Incorporator

1/20/2015  
Date

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TALLAHASSEE, FLORIDA