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COVER LETTER

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

SUBJECT:	BANDYQUEST, The . (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)		
	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	UDĒ SUFFIX)
Enclosed are an orig	inal and one (1) copy of the art	ticles of incorporation and	l 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	PY REQUIRED
FROM:	CAN IU Nam	E WESSTER e (Printed or typed)	
	5344 KINGF	ISHAS CT. Address	
		7 FC, 32303, State & Zip	
	·	Telephone number	
	E-mail address: (to be us	webstvegma 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)

The name of the corporation shall be:	BANDYQUEST, FAC.
ARTICLE II PRINCIPAL OFFICE Principal street address	Mailing address, if different is:
5344 Kitwarfisters CT.	P.O. Box 6843
Tallahasse, FL, 3230	3 Tallahassee, FL
	3 Tallahassee, FL 32314
ARTICLE III PURPOSE The purpose for which the corporation is organiz	ed is: (kny and all lawful businesses
	-2
	2016 H
	TAL TALSA
	m~ 111
ARTICLE IV SHARES The number of shares of stock is: 1900	20 PM 3: 35
ARTICLE V INITIAL OFFICERS AND	D/OR DIRECTORS
Name and Title: Camille We	bster, Preside Name and Tille:
Address 5344 Kingfis	·
Tallaharree	, FC, 32303
	<u> </u>
Name and Title:	who periode traine and Title:
Address Address	
Address The Principle	Address:
1411-143-11	
Name and Title:	Name and Title:
Address	Address:
·	

Name and	Title:	Name and Title:
Address		Address:
ARTICLE VI The <u>name and Flo</u>	REGISTERED AGENT orida street address (P.O. Box NOT acceptable) of the	he registered agent is:
Name:	Camille Webster	
Address;	5344 Kingfisher CT. Tallahassee, Fr, 32303	
ARTICLE VII	INCORPORATOR	
The name and add Name: Address:	Camille Webster 5344 Kingfishvi CT. Tallahassee, Fy 32303	
Науіна һеон пат	·	for the above stated corporation at the place designated in
this certificate, I a	im familiar with Maraccept the appointment as regis	stered agent and agree to act in this capacity 03/38/2815
I submit this doci document to the L	Required Signature/Registered Agent ument and affirm that the facts stated herein are to Department of State constitutes a third degree felony Required Signature/Incorporator	Date / cue. I am aware that the false information submitted in a as provided for in s.817.155, F.S. D3/30/20/5
	4	