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WASHINGTON

SEP 08 2015
W PAINTER

COVER LETTER

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

SUBJECT: CLIKSTYLE.NET INC
(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: SHARON WONG
Name (Printed or typed)

7720 ISABELLA DR APT B
Address

PORT RICHEY FL 34668
City, State & Zip

(727) 267-8660
Daytime Telephone number

sharand6329@yahoo.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 NAME

The name of the corporation shall be: CLIKSTYLE.NET-INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

7720 Isabelle Dr B
Port Richey FL 34668

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To provide
information technology services

ARTICLE IV SHARES

The number of shares of stock is: 1,500

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: SHARON WONG COO Name and Title: _____

Address: 7720 Isabelle Dr B Address: _____
Port Richey
FL 34668

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

15 AUG 31 AM 1:42
CLIKSTYLE.NET-INC
OFFICE OF THE
CLERK OF THE
CITY OF PORT RICHEY
FL 34668

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: SHARON WONG
Address: 7720 Isabella Dr B
Port Richey FL 34668

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: SHARON WONG
Address: 7720 Isabella Dr B
Port Richey FL 34668

15 AUG 31 AM 1:43
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

Sharon Wong
Required Signature/Registered Agent

8/28/15
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.

Sharon Wong
Required Signature/Incorporator

8/28/15
Date

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FILED
15 JUN 31 AM 1:42
CLERK OF STATE
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Address _____ Address: _____

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Port Richey Fl 34668

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Sharon Wong
Required Signature/Incorporator

8/28/15
Date

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Port Richey
FL 34668

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

7/11/00
15 AUG 31 AM 1:42
SECRETARY OF STATE
TALLAHASSEE FLORIDA

COVER LETTER

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

SUBJECT: BERGERON CONSTRUCTION SERVICES, INC.

(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 ☒ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: RANDALL E. BERGERON

Name (Printed or typed)

1698 E. ZYRIAN PLACE

Address

HERNANDO, FL. 34442

City, State & Zip

(352) 464-4684

Daytime Telephone number

DADDYDUCT8@AOL.COM

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

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