## P/6000/0/6/

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



000279394200

01/25/16--01037--009 \*\*70.00

SECRETARY OF STATE
ON TSION OF COMPORATION

~ 02/03/16

## **COVER LETTER**

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

SUBJECT:	Advantage	BailBoi	nds Inc.	
	(PROPOSED CORPORAT	E NAME – <u>MUST INCLU</u>	UDE SUFFIX)	
Enclosed are an orig	inal and one (1) copy of the artic	cles of incorporation and	a check for:	
\$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy	S87.50 Filing Fee, Certified Copy & Certificate of Status	
		ADDITIONAL CO	PY REQUIRED	
FROM:	Jeffre	Printed or typed)	1211	
	2677 NV	<u>Ú</u> 10 5+.		
<del></del>	Ocala, F	7. 34475 State & Zip		
	Daytime Te	SUS - OO	33	í
	E-mail address: (to be used	Toward Cou	ntybail bonds	.net

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:	tage Bail Bonds Inc.
ARTICLE II PRINCIPAL OFFICE Principal street address	Mailing address, if different is:
2677 NW 10 St.	
ARTICLE III PURPOSE  The purpose for which the corporation is organized is:  Ball Ba	and Agency
ARTICLE IV SHARES The number of shares of stock is:	PH 2: 30
ARTICLE V INITIAL OFFICERS AND/OR DIRECTO	
Address	Address:
<u>al77 nw 10</u> <u>Ocala, F1.3</u>	
Name and Title:	Name and Title:
Address	
Name and Title:	Name and Title:
Address	Address:

Name and Title:	Name and Title:	
Address	Address:	
	<del></del>	
ARTICLE VI REGISTERED AGENT		
The name and Florida street address (P.O. Box NOT ac	cceptable) of the registered agent is:	
Name: Jeffrey Milln	nan	
Address: 2477 NW 10 St	<del></del>	
Orala Fl. 34	1475	ر.
	<u>· · · · · · · · · · · · · · · · · · · </u>	i ion
ARTICLE VII INCORPORATOR		
The <u>name and address</u> of the Incorporator is:	್	
The mane and address of the incorporator is.	. , <u></u>	34 <u>6</u>
Name: Lettrey YMMM	Nan_	<u> </u>
Address: 2077 NW 10 St	?:	S
Address: October 100 100 100 100 100 100 100 100 100 10	30 ATIO	;m
Wald, 41. 390	<del>4 (5</del> 5	)
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 days after the filing.)	c and cannot be more than five business days prior or 90 bus	iness
Note: If the date inserted in this block does not meet the	e applicable statutory filing requirements, this date will not be lis	sted as
the document's effective date on the Department of State		,, <b>,,,</b> ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Having been named as registered agent to accept service	re of process for the above stated corporation at the place design	n <i>ated</i> in
this certificate, I am Jayrilliar with and accept the appoint	tment as registered agent and agree to act in this capacity	muicu in
V. March Wille		_
Required Signature/Registered	1 Agent	<u>/</u>
I submit this document and affirm that the facts stated document to the Department of State constitutes a third a	herein are true. I am aware that the false information submit	tted in a
- Mills		
	1/21/14	0
Required Signature/Incorporator	Date	