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| (Req | uestor's Name) | |
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| (City | /State/Zip/Phone | e #) |
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| PICK-UP | MAIT | MAIL |
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| /Due | iness Entity Nar | na) |
| (Bus | iness Enuty Man | ne) |
| | | |
| (Doc | ument Number) | |
| | | |
| Certified Copies | Certificates | s of Status |
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| Special Instructions to F | iling Officer: | |
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Office Use Only



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SLICRETARY OF STAFE

AUG 0 8 2017

K. Brumbley

COVER LETTER

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

| SUBJECT: Big Tre | e BBQ, Inc. | | |
|----------------------|--|---------------------------------------|--|
| SUBJECT. | (PROPOSED CORPORA | TE NAME – <u>MUST INCL</u> I | UDE SUFFIX) |
| Enclosed are an orig | ginal and one (1) copy of the art | icles 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 Cop & Certificate Status |
| | | ADDITIONAL CO | PY REQUIRED |
| FROM: | nice Bynum Name | e (Printed or typed) | |
| 296 | I NW 9th Street | | |
| | , | Address | · ·· |
| Por | npano Beach, Florida 33069 | | |
| <u> </u> | City, | State & Zip | |
| 954 | -531-2952 | | |
| - | - | elephone number | |
| jtre —— | ejr@gmail.com | | |
| | ti-mail address: (to be use | d for future annual report r | 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 corporat | ion shall be: | | | |
|--|---|----------------|---|-------------|
| | IPAL OFFICE Principal street address mpano Beach, Florida 33069 | | Mailing address, if different is | : |
| | This complete corporation is organized is: adder the laws of the United States, the States | | in or transact any or all lawfu y other state, country, territory | |
| | | | SECRETARY ALL AHASSI | 17 AUG -7 |
| ARTICLE IV SHARE The number of shares of ARTICLE V INITIA | | 00 | OF SAATE | WHII: \$5 |
| | Janice Bynum, President & CEO 2961 NW 9th Street | Name and Title | Kenneth Bynum, Secretary e: | |
| Address | Pompano Beach, Florida 33069 | Address: | Pompano Beach, Florida 33 | 069 |
| | | | | |
| Name and Title: | | Name and Title | e: | |
| Address | | | | ···- |
| | | | | |
| Name and Title: | | Name and Title | e: | |
| Address | | | | |
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| | | | | |

| Name ar | nd Title: | Name and Title: | |
|-------------------------------|---|---|----------|
| Address | s | Address: | |
| | | | |
| | | | |
| ARTICLE VI | REGISTERED AGENT | | |
| The name and F | lorida street address (P.O. Box NOT acceptab | e) of the registered agent is: | |
| Name: | Janice Bynum | | |
| Address: | 2961 NW 9th Street | <u> </u> | |
| | Pompano Beach, Florida 33069 | | |
| ARTICLE VII | INCORPORATOR | | |
| | ddress of the Incorporator is: | | |
| Name: | Gary B. McCleod | | |
| Address: | 6820 Bayfront Circle | | |
| | Margate, Florida 33063 | <u> </u> | |
| | | | |
| | EFFECTIVE DATE: July 31, 2017 | (OPTIONAL) | |
| | | nnot be more than five days prior or 90 days after th | e |
| | e inserted in this block does not meet the applic effective date on the Department of State's reco | able statutory filing requirements, this date will not be lisrds. | sted as |
| | | ocess for the above stated corporation at the place design is registered agent and agree to act in this capacity | nated in |
| | Tat | July 31, 2017 | |
| - | Required Signature/Registered Agent | Date | |
| I submit this document to the | cument and affirm that the facts stated herein Department of State constitutes a third degree | are true. I am aware that the false information submit felony as provided for in s.817.155, F.S. | ted in a |
| On: | D. MC—— ired Signature/Incorporator | July 31, 2017 | |
| Requ | ired Signature/Incorporator | Date | |