Division of Corporations

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To:

Division of Corporations

Fax Number : (850) 617-6381

From:

Account Name : C T CORPORATION SYSTEM

Account Number: FCA000000023
Phone: (614)280-3338
Fax Number: (954)208-0845

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FLORIDA PROFIT/NON PROFIT CORPORATION

BluePearl California, Inc.

Certificate of Status	0
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ARTICLES OF INCORPORATION

	In compliance with Chapter 607 and	or Chapter 621, F.S.	(Profit)	
The name of the corporat	BluePearl Callfornia, Inc.			
ARTICLE II PRINC	-	Ma	Mailing address, if different is:	
2950 Busch Lake Blvd				•••
Tampa, Florida 3361	4-1859		_	_
ARTICLE III PURPO The purpose for which the	DSE ne corporation is organized is:			
Any and all lawful purp	poses for which a corporation may be fo	ermed.		
			705	18
				-53
				1
				-4 P7412:
			· · · · · · · · · · · · · · · · · · ·	
				7.
The number of shares of sh	LOFFICERS AND/OR DIRECTORS Damy Shaw President and Secretary	Nume and Title		
Address	2050 B	Address:	·····	
Address	Tampa, FL 33614-1859	Acoress		
Name and Title:		Name and Title:		
Address				
Addiess		Audiess		
Name and Title:		Name and Title;		
Addiess		Address:		
		· · · · · · · · · · · · · · · · · · ·		

Name at	nd Title:	Name and Title:	
Address		Address:	
			,
ARTICLE VI	REGISTERED AGENT lorida street address (P.O. Box NOT accepte	ble) of the registered agent is:	A S. 18
Name:	C T Corporation System		SEP
Address:	1200 South Pine Island Road		- 1 - 5
	Plantation, FL 33324		72.
ARTICLE VII	INCORPORATOR		i 531 Kd
The name and a	ddress of the Incorporator is:		
Name:	Christopher Stewart c/o Mars, Inc.		
Address:	6885 Elm Street		
	McLean, Virginia 22101		
	EFFECTIVE DATE:	(0.07(0.04.4.)	
(If an effective	other than the date of filing:date is listed, the date must be specific and		or 90 days after the
	e inserted in this block does not meet the appl		s date will not be listed as
	effective date on the Department of State's red		
this certificate, I	med as registered agent to accept service of p am familiar with and accept the appointmen	t as registere dugibit Angag ree to act in	n at the place designated i this capacity
C T Corporation	1 System	Vice President and Assistant Secretary	9/4/18
	Required Signature/Registered Age	nt	Date
I submit this do. document to the	cument and affirm that the facts stated here Department of State constitutes a third degre	in are true. I am aware that the false e felony as provided for in s.817.155, F	information submitted in .S.
1 hic	1/		09/04/2018
Requi	ired Signature/Incorporator		Date
Charac	onhar Stawert Incomprator		