P19000006308

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· · · · · · · · · · · · · · · · · · ·	(Requestor's Name)
_	(Address)
, 25.	(Address)
	(City/State/Zip/Phone #)
PICK-L	UP WAIT MAIL
. &	(Business Entity Name)
	(Document Number)
	Certificates of Status
	ns to Filing Officer:
🤏	

Office Use Only

R KEMPIF SEP n 4 2019



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RECEIVED

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

BAD Promotions In	с	
		Art of Inc. File
		LTD Partnership File
		Foreign Corp. File
		L.C. File
		Fictitious Name File
		Trade/Service Mark
		Merger File
		Art. of Amend. File
		RA Resignation
		Dissolution / Withdrawal
		Annual Report / Reinstatement
		Cent. Copy
		Photo Copy
		Certificate of Good Standing
		Certificate of Status
		Certificate of Fictitious Name
		Corp Record Search
		Officer Search
		Fictitious Search
Signature		Fictitious Owner Search
Signature		Vehicle Search
		Driving Record
Requested by: Seth	00/04/10	UCC 1 or 3 File
	$\frac{09/04/19}{\text{Date}} {\text{Time}}$	UCC 11 Search
Name	Date Time	UCC 11 Retrieval
Walk-In	Will Pick Up	Courier

COVER LETTER

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

SUBJECT: BAD Promolions INC				
	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	<u>UDE SÜFFIX</u>)	
Y"1			1 1 6	
Enclosed are an orig	inal and one (1) copy of the ar	ticles of incorporation and	1 a check for:	
\$70.00	□ \$78.75	□ \$78.75	□ \$87.50	
Filing Fee	Filing Fee	Filing Fee	Filing Fee,	
	& Certificate of Status	& Certified Copy	Certified Copy	
			& Certificate of Status	
		ADDITIONAL CO		
				
FD 61.4	BLAKE DA	2116		
FROM:	Name of the Name o	re (Printed or typed)		
		٠		
5101 SW 111 TENTACE				
		Address		
	DAVIE FLO	CVA 333	32 <u>8 </u>	
	City	, State & Zip		
	561-409-996	\mathcal{O}'		
Daytime Telephone number				
	Bobby Sunshine	Command Cal	14.) (41	
	E-mail address: (to be use	cd 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: BAD	Promotions In	\(\)
ARTICLE II PRINCIPAL OFFICE Principal street address	Mailing a	ddress, if different is:
SIOI SW 111th TEVER DAVIE FLOVIDA 3332	_	
ARTICLE III PURPOSE The purpose for which the corporation is organized	is: Proffessional Box	KEV - BOXNE
Promoter.		
ARTICLE IV SHARES The number of shares of stock is: / O	 -	
ARTICLE V INITIAL OFFICERS AND/OR DI	IRECTORS OCS DENT	
Name and Title: BLAKE DA	VI - 116 Name and Title:	
	1-th Temotaddress:	
DAVIE FLO	<u>~100 33328</u>	
Name and Title:	Name and Title:	
Address	Address:	
		- š
Name and Title:	Name and Title:	\$P - ₽
Address		10 m 2 m
		<u></u>

Name and T	itle:	Name and Title:	· · · · · · · · · · · · · · · · · · ·
Address		Address:	
	GISTERED AGENT da street address (P.O. Box NOT acceptable	le) of the registered agent is:	
Name:	BLAKE DAVIS		
Address:	5101 SW 111 TEM	40E	
-	DAVIE FLOVIDA 333	28	
ARTICLE VII IN	<u>CORPORATOR</u>		
The name and addr	ess of the Incorporator is:		
Name:	BLAKE DAVIS	<u></u>	
Address:	5101 SW 111 TEN		
	DAVIE FLOTION 33	28	
ARTICLE VIII Ed Effective date, if oth (If an effective date filing.)	FFECTIVE DATE: er than the date of filing: is listed, the date must be specific and ca	. (OPTIONAL annot be more than five days p) rior or 90 days after the
	serted in this block does not meet the applicative date on the Department of State's reco		s, this date will not be listed as
	as registered agent to accept service of pro- familiar with and accept the appointment of		
_ Blak	Le Daris		83-19
	Required Signature/Registered Agent		Date
	nent and affirm that the facts stated herein purtment of State constitutes a third degree		
Blake	2 Davis		8-31-19
Required	l Signature/Incorporator		Date
			= 0
			PAD ET
			A