

P20000 003072

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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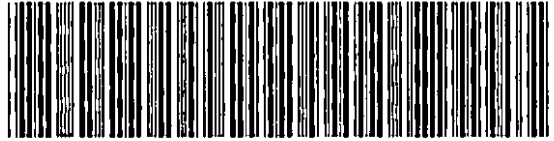
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2019 DEC 19 PM 3:27
SECRETARY OF STATE
TALLAHASSEE, FL

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COVER LETTER

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

SUBJECT: B - COMM CLEAR, 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: CHERI FLETCHER
Name (Printed or typed)

12035 NE 2ND AVE A-318
Address

N. MIAMI FL 33161
City, State & Zip

786-314-2087
Daytime Telephone number

BCOMMCLEAR@JUNO.COM
E-mail address: (to be used for future annual report notification)

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

To Whom It May Concern,

I, Cheri Fletcher, President of B-Comm Clear, Inc (EIN: 26-0113634), allow the use and transfer of the name to open and register for a new company using the name B-Comm Clear, Inc.

Sincerely,

A handwritten signature in cursive script that reads "Cheri Fletcher". The signature is written in dark ink and has a fluid, connected style.

Cheri Fletcher

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SECRETARY OF STATE
TALLAHASSEE, FL

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: B-COMM CLEAR, INC

ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address
12035 NE 2ND AVE # A-318
N. MIAMI, FL 33161

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY AND ALL LAWFULL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: CHERI FLETCHER Name and Title: _____

Address 12035 NE 2ND AVE A-318 Address: _____
N. MIAMI, FL 33161

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

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TALLAHASSEE, FL

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: CHERI FLETCHER
Address: 12035 NE 2ND AVE A-318
N. MIAMI, FL 33161

ARTICLE VII INCORPORATOR

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

Name: CHERI FLETCHER
Address: 12035 NE 2ND AVE A-318
N. MIAMI, FL 33161

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: JAN, 1, 2020 (OPTIONAL)

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

Cheri Fletcher
Required Signature/Registered Agent

12/15/2019
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.

Cheri Fletcher
Required Signature/Incorporator

12/15/2019
Date

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