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COVER LETTER

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

SUBJECT:	James Llaramor (PROPOSED CORPORA	ر				
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	<u>UDE SUFFIX</u>)			
Enclosed are an orig	ginal and one (1) copy of the art	icles of incorporation and	l a check for:			
□ \$70.00 Filing Fee	Filing Fee & Certificate of Status	☐ \$78.75 Filing Fee & Certified Copy	& Certificate of Status			
		ADDITIONAL COPY REQUIRED				
FROM:	James L. Parar	••				
	3211 Bunche	Ave Address				
Tallahassee FL. 32305 City, State & Zip						
	305 2116 - Daytime 1	6511 Felephone number				
	AJParamore & E-mail address: (to be use	Oqtt, Net	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:	Bed and Breakfast INC
ARTICLE II PRINCIPAL OFFICE Principal street address 3.210 Hastie Rd. Tallahassee FL. 32305	Mailing address, if different is: 3211 Bunche Ave Talla hassee FL. 32305
ARTICLE III PURPOSE The purpose for which the corporation is organized is: Sho	•
ARTICLE IV SHARES The number of shares of stock is:	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS Name and Title: Address	Name and Title: James L. Pake move (F Address: 3211 Bunche Ave Tallahassee FL. 32306
Name and Title:	`
	Name and Title: Address:

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Name and Title	u:	ا الله الله	isame and Title: عن من		
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Address		400	_ Address:		
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ARTICLE VI REGI		Day NOT	List - Calcon List of the	. •	
			ble) of the registered ager	nt is:	
Name: \(\sqrt{\sq}}}}}}}\signt{\sqrt{\sq}}}}}}}}\signt{\sq}}\signt{\sqrt{\sqrt{\sq}}}}}}\sqrt{\sqrt{\sq}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}	ames L. 1	Paramere			
	<u>. ∧</u>	. A			
ك Address:	211 Bunc	he Ave			
		 ,	3771	i	A
_/	allahasse	3e, 1-2:	<u>323</u> 03	7	23
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ARTICLE VII INCO	ORPORATOR			$\tilde{\mathcal{G}}$	D -
					8
The name and address	of the Incorporator is	8:		<u> </u>	سعدا سد ش
	. 	\triangleright		<u></u>	PIB PH 3:5:
Name: _	James L	<u>. Farama</u>	<u>re</u>	$\widehat{\mathcal{I}}$	ట 🔾
Address:	3211 Bun Tallahas	icho Ave			C)
Audiess.	$\frac{32n}{2}$		<u></u>		S
	Tallahas	see, re	5.323d5		
•					
ARTICLE VIII EFF	ECTIVE DATE:				
			(OP		
filing.)	ustea, the date mus	st be specific and	cannot be more than fi	ive days prior or 90 da	ays after the
nung.)					
Note: If the date inser	ted in this block doe:	s not meet the annl	icable statutory filing re-	auirements, this date w	vill not be listed as
the document's effective				7	
Havina heen named as	revistered agent to a	ecent convice of nr	cess for the above stated	l carparation at the place	ea davianatad in this
cerlificate, I am familio	ir with and accept the	e appointment as r	egistered agent and agree	e to act in this canacity	e designated in this
	()				
male	~ 3 1	Ch. March		7.10	4.72
	Required Signatu	re/Registered Ager	11		Date
I submit this documen	t and affirm that the	e facts stated herei	n are true. I am aware	that the false informa	tion submitted in a
aocument to the Depar	tmént of State constit	tutes a third degree	felony as provided for it	n s.817,155, F.S.	
/ /	\ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	6		0 11	J 73
Required Signature/Inc	W. W. Commercial Comme	N()		Data 4-1	8-47
required Signature/Inc	мумани			Date	