

P970060375/0

TRANSMITTAL LETTER

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

SUBJECT: BBA(Inc.) (BETTER BUSINESS ASSOCIATIONS)
(Proposed corporate name - must include suffix)

300002155553--4
-04/25/97--01097--009
****122.50 ****122.50

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

☐ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate

☐ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: ALTO BLANDING SR.
Name (Printed or typed)

311 Copri Isles Ct.
Address

PUNTA GORDA, FL. 33950
City, State & Zip

(941) 575-4779
Daytime Telephone number

FILED
97 APR 25 AM 11:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

APR 28 1997
[Signature]

APRIL 22, 1997

DIVISION OF CORPORATIONS
P.O. BOX 6327
TALLAHASSEE, FL 32314

RE: ARTICLES OF INCORPORATION

GENTLEMEN:

PLEASE FIND ATTACHED, ARTICLES OF INCORPORATION, DATED APRIL 22, 1997, FOR
BETTER BUSINESS ASSOCIATION INC. (BBA)

ATTACHED IS OUR CHECK IN THE AMOUNT OF \$122.50, REPRESENTING FEES FOR
FILING AND A CERTIFIED COPY.

VERY TRULY YOURS,

A handwritten signature in cursive script, appearing to read "Alto Blanding Sr.", is written over the typed name.

ALTO BLANDING SR.
P.O. BOX 1723
PUNTA GORDA, FLORIDA 33950

ARTICLES OF INCORPORATION
OF
BETTER BUSINESS ASSOCIATION, INC.

FILED
97 APR 25 AM 11:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

THE UNDERSIGNED SUBSCRIBER TO THESE ARTICLES OF INCORPORATION, A NATURAL PERSON COMPETENT TO CONTRACT, HEREBY FORMS A CORPORATION UNDER THE LAWS TO THE STATE OF FLORIDA.

FIRST: THE NAME OF THE CORPORATION IS : BETTER BUSINESS ASSOCIATION INC.

SECOND: THE CORPORATION MAY ENGAGE IN ANY ACTIVITY OR BUSINESS PERMITTED UNDER THE LAWS OF THE UNITED STATES AND OF THE STATE OF FLORIDA. THE PRINCIPAL ACTIVITY OF THE CORPORATION WILL BE TO OWN AND OPERATE A SALES, DISTRUBUTION AND TELECOMMUNICATIONS BUSINESS.

THIRD: THE MAXIMUM NUMBER OF SHARES OF STOCK THAT THIS CORPORATION IS AUTHORIZED TO HAVE OUTSTANDING AT ANY TIME IS FIVE THOUSAND(5,000) SHARES OF COMMON STOCK HAVING A PAR VALVE OF ONE DOLLAR (\$1.00) PER SHARE.

FOURTH: THE AMOUNT OF CAPITAL WITH WHICH THIS CORPORATION WILL BEGIN BUSINESS WILL BE NOT LESS THAN FIVE HUNDRED (\$500.00) DOLLARS.

FIFTH: THE CORPORATION IS TO EXIST PERPETUALLY.

SIXTH: THE INITIAL STREET ADDRESS OF THE PRINCIPAL OFFICE OF THE CORPORATION IN THE STATE OF FLORIDA IS : 311 CAPRI ISLES COURT, PUNTA GORDA, FLORIDA 33950.

SEVENTH: THIS CORPORATION SHALL HAVE ONE DIRECTOR INITIALLY. THE NUMBER OF DIRECTORS MAY BE INCREASED OR DECREASED BY BY-LAWS ADOPTED BY THE SHAREHOLDERS AT ANY TIME AND FROM TIME TO TIME.

EIGHTH: THE NAME AND POST OFFICE ADDRESS OF THE MEMBER OF THE FIRST BOARD OF DIRECTORS IS :ALTO BLANDING SR. P.O. BOX 1723, PUNTA GORDA, FL 33950.

NINTH: THE NAME AND STREET ADDRESS OF THE SUBSCRIBER TO THESE ARTICLES OF INCORPORATION IS AS FOLLOWS: ALTO BLANDING SR, 311 CAPRI ISLES COURT, PUNTA GORDA, FL 33950.

TENTH: THE NAME OF THE INITIAL RESIDENT AGENT AND THE ADDRESS OF THE RESIDENT OFFICE AS FOLLOWS: ALTO BLANDING SR. 311 CAPRI ISLES COURT, PUNTA GORDA, FL 33950

IN WITNESS WHEREOF, I HAVE HEREUNTO SET MY HAND AND SEAL THIS 22ND DAY OF APRIL, 1997.

SUBSCRIBER:

Alto Blanding Sr.
ALTO BLANDING, SR.

CONSENT OF REGISTERED AGENT

HAVING BEEN NAMED AS REGISTERED AGENT AT THE REGISTERED OFFICE DESIGNATED IN THE ARTICLES, THE UNDERSIGNED ACCEPTS THE DESIGNATION AS REGISTERED AGENT.

RESIDENT AGENT:

Alto Blanding Sr.
ALTO BLANDING SR.

STATE OF FLORIDA
COUNTY OF CHARLOTTE

I HEREBY CERTIFY THAT ON THE 22nd DAY OF APRIL 1997, BEFORE ME A NOTARY PUBLIC DULY AUTHORIZED IN THE STATE AND COUNTY NAMED ABOVE TO TAKE ACKNOWLEDGEMENT, PERSONALLY APPEARED ALTO BLANDING SR TO ME KNOWN TO BE THE PERSON DESCRIBED AS SUBSCRIBER IN AND WHO EXECUTED THE FOREGOING ARTICLES OF CORPORATION, AND THAT THE FACTS THEREIN ARE TRULY SET FORTH.

WITNESS MY HAND AND OFFICIAL SEAL AT PUNTA GORDA, CHARLOTTE COUNTY, FLORIDA, THE DAY AND YEAR AFORESAID.

MY COMMISSION EXPIRES: _____

Carl RL



Catherine Lynn Robinson
MY COMMISSION # CC508277 EXPIRES
December 17, 1999
BONDED THRU TROY FAIR INSURANCE, INC.

CATHERINE LYNN ROBINSON

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

97 APR 25 AM 11:16

FILED