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PLEASE REMOVE THIS FRAME AND ALL PREVIOUS FRAMES.

TRANSMITTAL LETTER

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

SUBJECT:	Bill Stevens, Inc.
	(Proposed corporate name - must include suffix)

500002223945--8

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

\$131.25 Filing Fee,

& Certified Copy

Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

FROM:	William Gerard Stevens Name (Printed or typed)
	• • • • • • • • • • • • • • • • • • • •
	2221 N.E. 164 th Street, Suite#358
	North Miami FL 33160
	Citý, State & Zip
	(561) 362-6536

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

Daytime Telephone number

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RTICLES OF INCORPORA	TION	
ne undersigned incorporator, for the purp usiness Corporation Act, hereby adopts th	Alli So	
RTICLE I NAME the name of the corporation shall be:	Bill Stevens, Inc.	

PRINCIPAL OFFICE ARTICLE II

The principal place of business and mailing address of this corporation shall be:

2221 N.E. 164 th Street Suite \$358 North Miami, FL 33160

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

William Gerard Stevens 2221 N.E. 164th Street Suite# 358 North Miami, FL 33160

ARTICLE V **INCORPORATOR**

The name and address of the incorporator to these Articles of Incorporation are:

William Gerard Stevens 2221 N.E. 164th Street Swite 358 North Miami, FL 33160

(An additional article must be added if an effective date is requested.)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent 6/23/97 Date

Signature/Registered Agent

Signature/Incorporator