

P98000105520

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

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-12/17/98--01117--017
*****87.50 *****87.50

SUBJECT:

BALLYHOO Incorporated
(Proposed corporate name - must include suffix)

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 of Status

☐ \$78.75 Filing Fee
& Certified Copy
☐ \$87.50 Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM:

ROSE CLARY

Name (Printed or typed)

833 BOEING ST NE

Address

PAIM BAY FL 32907

City, State & Zip

407-724-7063

Daytime Telephone number

FILED
98 DEC 17 AM 11:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

CB
12-21-98
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ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

Ballyhoo Incorporated

ARTICLE II PRINCIPAL OFFICE

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

833 Boeing St NE Palm Bay FL

ARTICLE III SHARES

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

1000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

ROSE CLARY

833 BOEING ST NE PALM BAY FL 32907

ARTICLE V INCORPORATOR

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

ROSE CLARY FOR BALLYHOO

833 BOEING ST NE PALM BAY FL 32907

Rose Clary

Signature/Incorporator

12/7/98

Date

(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

Rose Clary

Signature/Registered Agent

12/7/98

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA