P99000021902

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

500002799895----03/09/99--01086--002 ******78.75 *****78.75

SUBJECT:	BBA, INC.		
	(Proposed corp	orate name - must include su	affix)
Enclosed is an origin	al and one(1) copy of the artic	les of incorporation and a	check for:
\$70.00	☎ \$78.75	□\$78.75	5 \$87.50
Filing Fee	Filing Fee & Certificate of Status	Filing Fee & Certified Copy	Filing Fee, Certified Copy & Certificate of
	•	ADDITIONAL CO	Status
FROM:	BILL WALKER	-	
- 4.55.4.	Name (Printed or typed)	
	30623 Swan	Road	99 SEC TALL
.02		Address	99 MAR SECRETALLARIA
A STATE OF THE PARTY OF THE PAR	Sorrento,]	Florida 32776	-8 SSEI
MACH	City, State & Zip		Y OF S
100	352 / 385-	-0232	2: 06 STATE LORID/
122 97	Daytime 1	Felephone number 7 / 237-8399	
	2544	104	
-191	The state of the s	OTI	,

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



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

February 22, 1999

BILL WALKER 30623 SWAN ROAD SORRENTO, FL 32776

SUBJECT: BBA, INC.

Ref. Number: W99000004392

We have received your document for BBA, INC., however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$78.75.

The document must state the number of shares of authorized stock.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Simply adding "of Florida" or "Florida" to the end of a name is not acceptable. Please select a new name and make the correction in all appropriate places. One or more words may be added to make the name distinguishable from the one presently on file.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6923.

Doris McDuffie Corporate Specialist Supervisor

Letter Number: 699A00008001



FLORIDA DEPARTMENT OF STATE

Katherine Harris Secretary of State

March 2, 1999

BILL WALKER 30623 SWAN ROAD SORRENTO, FL 32776

SUBJECT: BW BBA, INC. Ref. Number: W99000005060 NT OF STATE rris rate 3

We have received your document for BW BBA, INC. and check(s) totaling \$78.75. However, your check(s) and document are being returned for the

The document must state the number of shares of authorized stock.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6923.

Doris McDuffie Corporate Specialist Supervisor

Letter Number: 999A00009468

ARTICLES OF INCORPORATION

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

FILED

99 MAR -8 PM 2:06

SECRETARY OF STATE
TALLAHASSEE, FLORIFA

<u>ARTICLE I NAME</u>

The name of the corporation shall be:

BBA ENTERPRISES INC

ARTICLE II PRINCIPAL OFFICE

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

30623 Swan Road, Sorrento, Florida 32776

ARTICLE III SHARES

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

60/

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Bill Walker

30623 Swan Road

Sorrento, Florida

32776

ARTICLE V INCORPORATOR

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

Bill Walker

30623 Swan Road

Sorrento, Florida 32776

Signature/Incorporator

Date

Bill Walker

(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

Signature/Registered Agent

ea Agent

Bill Walker