

TRANSMITTAL LETTER

P99000056433

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

800002910188--0
-06/21/99-01065--004
*****87.50 *****87.50

SUBJECT:

BIDO, INC.

(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:

Tim Murphy.

Name (Printed or typed)

141 EAST RIVERSIDE DR. 6A.

Address

TEQUESTA, FL, 33469.

City, State & Zip

561-745-3101

Daytime Telephone number

FILED
99 JUN 21 PM 1:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

ajc
6/22

Articles of Incorporation

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

Article I

The name of the corporation shall be **BIDO, inc.**

Article II

The principal place of business and mailing address shall be:

9920 Alternate A1A, Palm Beach Gardens, Fl 33410

Article III

The Number of Shares this company is authorized to have outstanding at any one time is:

125,000

Article IV

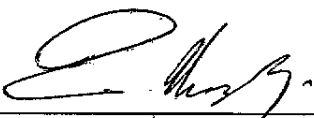
The name and Florida street address of the initial registered agent are:

Timothy D Murphy of 141 East Riverside Drive 6a, Tequesta Fl 33469

Article V

The name and address of the incorporator to these articles are:

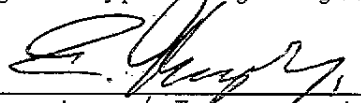
Timothy D Murphy of 141 East Riverside Drive 6a, Tequesta Fl 33469



Signature/ Incorporator

6-17-99
Date

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/ Incorporator/Registered Agent

6-17-99
Date

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TALLAHASSEE, FLORIDA