

P99000062802

TRANSMITTAL LETTER

FILED
99 JUL -8 AM 8:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

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-07/08/99--01044--007
*****87.50 *****87.50

SUBJECT: BW: PP 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: Linda Scott
Name (Printed or typed)

6820 Cherbourg Ave N.
Address

Jacksonville, FL 32205
City, State & Zip

(904) 781-4473 or (904) 924-0702
Daytime Telephone number

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

Linda Scott GAVE
AUTHORIZATION BY PHONE TO
CORRECT Steph
DATE 7/15/99
DOC. EXAM Dee's Brown

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:

BW:PP INC.

ARTICLE II PRINCIPAL OFFICE

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

6820 CHERBOURG AVE N.
JACKSONVILLE, FL. 32205

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:

Linda Scott
6820 CHERBOURG AVE N.
JACKSONVILLE, FL. 32205

ARTICLE V INCORPORATOR

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

Linda Scott
6820 CHERBOURG AVE N.
JACKSONVILLE, FL. 32205

Linda A. Scott
Signature/Incorporator

7-5-99
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

Linda A. Scott
Signature/Registered Agent

7-5-99
Date

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