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99 SEP - 1 AM 7:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Requestor's Name
BCI
4459 Park breeze Ct.
Orlando, FL 32808

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. _____ (Corporation Name) _____ (Document #)
2. _____ (Corporation Name) _____ (Document #)
3. _____ (Corporation Name) _____ (Document #)
4. _____ (Corporation Name) _____ (Document #)

- ☐ Walk in ☐ Pick up time _____ ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

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-08/16/99--01108--005
*****78.75 *****78.75

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

AUTHORIZATION BY PHONE TO
CORRECT B.A.
DATE 8-31-99
DOC. EXAM 76

F. CHESSER SEP 1 1999

F. CHESSER AUG 2. 0 1999

Examiner's Initials



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

August 20, 1999

B.C.I.
4459 PARK BREEZE COURT
ORLANDO, FL 32808

SUBJECT: B.C.I. BOLENA COMMUNICATIONS INC.
Ref. Number: W99000019333

We have received your document for B.C.I. BOLENA COMMUNICATIONS INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Corporations may file using only the corporate name. Please delete any reference to the "doing business as name" in your document. If you wish to register your fictitious name, you may do so by filing the enclosed application and submitting the appropriate fees to this office.

The registered agent must sign accepting the designation.

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) 487-6904.

Freida Chesser
Corporate Specialist

Letter Number: 599A00041982

**ARTICLES OF INCORPORATION
OF
BOLENA COMMUNICATIONS, INC.**

The Undersigned subscribers to these Articles of Incorporation, natural persons competent to contract, hereby subscribes to and forms a corporation for profit under the laws of the State of Florida.

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TALLAHASSEE FLORIDA

ARTICLE I NAME

The name of the corporation is: **Bolena Communications Inc.**

ARTICLE II NATURE OF BUSINESS

The Corporation may engage in any activity or business permitted under the Laws of the United States of America and of the State of Florida.

ARTICLE III CAPITAL STOCK

The maximum number of shares of stock that this Corporation is authorized to have outstanding at any time is 1000 shares of common stock, having a par value of one (\$1.00) Dollar.

ARTICLE IV INITIAL CAPITAL

The amount of capital with which this corporation shall begin will be \$1,000.00 (One Thousand Dollars and no cents)

ARTICLE V TERM OF EXISTENCE

This Corporation shall have perpetual existence.

ARTICLE VI ADDRESS

The principal office of this Corporation shall be and is located at: 4459 Parkbreeze Court
Orlando, FL 32808.

The Board of Directors may from time to time designate such other address and place of the principal office of the Corporation as it may see fit.

ARTICLE VII DIRECTORS

The Corporation shall have four (1) Director initially, but may be increased from time to time by a majority vote by the Board of Directors.

The four (1) director names and addresses are listed below:

NAMES AND ADDRESSES

Deanna Bolena
961 Saddleback Ridge Rd.
Apopka, Fl 32703

ARTICLE VIII DIRECTORS

The subscribers to these Articles of Incorporation are the persons named above to serve as a board of directors of the Corporation.

The names such subscribers and their respective addresses are more particularly set forth in ARTICLE VII above.

ARTICLE VIII EFFECTIVE DATE

These Articles of Incorporation shall be effective upon their having been properly filed with and excepted by the SECRETARY of the State of FLORIDA.

IN WITNESS WHEREOF; we have hereunto set forth our hands and seal, acknowledged and filed the foregoing Articles of Incorporation under the laws of the STATE of FLORIDA, this 5TH day of JUNE 1999.

Deanna R Bolena 8/10/99
DEANNA BOLENA DATE

REGISTERED AGENT/INCORPORATOR I HEREBY ACCEPT AS REGISTERED AGENT.

**STATE OF FLORIDA
COUNTY OF ORANGE**

Before me personally appeared DEANNA BOLENA, who is well known to me and known to me to be the individual described in and who executed the foregoing Articles of Incorporation and acknowledged before me that she executed the same for the purpose therein expressed.

WITNESS my hand and official seal in the County and State named above this 10th day of August 1999.

Donna L Mitchell
NOTARY PUBLIC, STATE OF FLORIDA

NOTARY SEAL:

DONNA L. MITCHELL
Notary Public - State of Florida
My Commission Expires Sep 30, 2002
Commission # CC779587

CERTIFICATE OF DESIGNATION
REGISTERED AGENT / REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statements in designating the registered office / agent, in the State of Florida.

1. The name of the corporation is:
BOLENA COMMUNICATIONS INC.
2. The name and address of the registered agent and office is:
DEANNA BOLENA
1151 POST LAKE PLACE, #113
APOPKA, FL 32703

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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 SEE SIGNATURE ON PREVIOUS PAGE

DATE JUNE5, 1999