

P12000031145

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

*re-sending
correction
3/30/12*

RECEIVED MAR 30 2012

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**FLORIDA PROFIT/NON PROFIT CORPORATION
BERNARD & CO.**

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$78.75

12 MAR 30 AM 11:30

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FLORIDA DEPARTMENT OF STATE
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Corporate Filing Menu

Help



March 30, 2012

FLORIDA DEPARTMENT OF STATE
Division of Corporations

EMPIRE

SUBJECT: BERNARD & CO.
REF: W12000017986

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

If you have any further questions concerning your document, please call (850) 245-6052.

Justin M Shivers
Regulatory Specialist II
New Filing Section

FAX Aud. #: E12000082811
Letter Number: 412A00010636

12 MAR 30 AM 11:30

SECRETARY OF STATE
DIVISION OF CORPORATIONS

P.O BOX 6327 - Tallahassee, Florida 32314

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

1172000082811

ARTICLE I NAME
The name of the corporation shall be: **BERNARD & CO., INC.**

ARTICLE II PRINCIPAL OFFICE
Principal street address
3590 KENT DR.
NAPLES, FL 34112

Mailing address, if different is:
SAME

ARTICLE III PURPOSE
The purpose for which the corporation is organized is:
ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES
The number of shares of stock is: **200 @ 10.00**

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: **P - BERNARD RENAULT** Name and Title: _____
Address: **3590 KENT DR.** Address: _____
NAPLES, FL 34112

Name and Title: **VP/S/T - EDNA RENAULT** Name and Title: _____
Address: **3590 KENT DR.** Address: _____
NAPLES, FL 34112

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: **LINDA WESTERFER**
Address: **720 GOODLETTE RD. N. #203**
NAPLES, FL 34112

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: **BERNARD RENAULT**
Address: **3590 KENT DR.**
NAPLES, FL 34112

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Linda Westerfer

Required Signature/Registered Agent

03-29-2012

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Bernard Renault

Required Signature/Incorporator

03-29-2012

Date

1172000082811