

TRANSMITTAL LETTER
P02000049678

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

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-03/18/02--01049--001
*****87.50 *****87.50

SUBJECT: RL CO, 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: BRIAN COHEN
Name (Printed or typed)

4105 N. 49TH AVE.
Address

HOLLYWOOD, FL 33021
City, State & Zip

Daytime Telephone number

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

FILED
02 MAY -6 AM 8:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

na 5/7

ARTICLES OF INCORPORATION

OF

BRIAN S ASSOCIATES, INC.

FILED

02 MAY -6 AM 8:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

BRIAN S ASSOCIATES, INC.

ARTICLE II PRINCIPAL OFFICE

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

4105 N. 49TH AVE.
HOLLYWOOD, FL 33021

ARTICLE III SHARES

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

1000 SHARES

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

BRIAN COHEN
4105 N. 49TH AVE.
HOLLYWOOD, FL 33021

ARTICLE V INCORPORATOR(S)

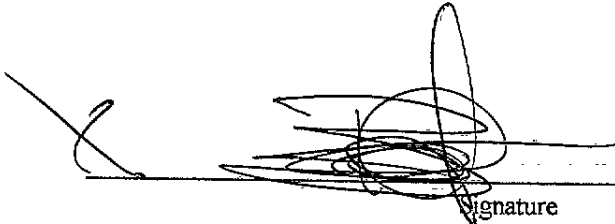
The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

BRIAN COHEN

4105 N. 49th AVE.
HOLLYWOOD, FL 33021

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

11th day of NOVEMBER, 2000



Signature

Signature

Signature

**Articles of Incorporation
Filing Fee - \$35**

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of sections 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the laws of the state of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida.

1. The name of the corporation is: BRIAN S ASSOCIATES, INC.

2. The name and address of the registered agent and office is:

BRIAN CONEN

(Name)

4105 N. 49th AVE.

(P.O. Box NOT acceptable)

HOLLYWOOD, FL 33021

(City/State/Zip)

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 

DATE 11-15-00

REGISTERED AGENT FILING FEE: \$35.00

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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TALLAHASSEE, FLORIDA