

P0300012420S

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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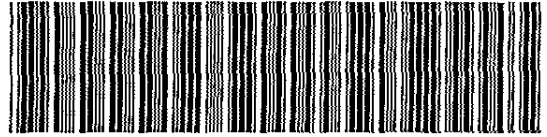
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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03 OCT 27 PM 6:01

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

11/3

## TRANSMITTAL LETTER

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

SUBJECT: JOHN O'BRIEN, INC.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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: DONNA SACCO

Name (Printed or typed)

5725 SW 112TH TERRACE

Address

COOPER CITY, FL 33328

City, State & Zip

954-680-4818

Daytime Telephone number

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

# ARTICLES OF INCORPORATION

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

## ARTICLE I NAME

The name of the corporation shall be:

JOHN O'BRIEN, INC.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

4870 SW 29TH TERRACE  
FORT LAUDERDALE, FLORIDA 33312

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO ENGAGE IN ANY BUSINESS, ACTIVITY OR ENDEAVOR WHICH IS LAWFUL OF  
THE LAW OF THE STATE OF FLORIDA.

## ARTICLE IV SHARES

The number of shares of stock is:

(ONE THOUSAND) 1000 SHARES

## ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

JOHN O'BRIEN P/VP/S  
4870 SW 29TH TERRACE  
FORT LAUDERDALE, FL 33312

## ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

JOHN O'BRIEN  
4870 SW 29TH TERRACE  
FORT LAUDERDALE, FL 33312

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

DONNA SACCO  
C/O BERNARD DODDO  
5725 SW 112TH TERRACE  
COOPER CITY, FL 33026

\*\*\*\*\*  
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

  
\_\_\_\_\_  
Signature/Registered Agent

10/24/2003

\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

10/24/2003

\_\_\_\_\_  
Date

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TALLAHASSEE, FLORIDA