

PO3000132285

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

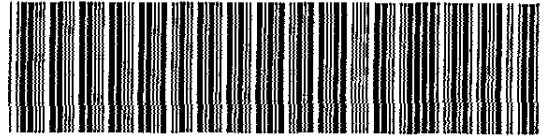
(Business Entity Name)

(Document Number)

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

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2003 NOV -7 PM 3:35  
TALLAHASSEE FLORIDA  
CLERK OF COURT

gf 11/14/03

TRANSMITTAL LETTER

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

FILED  
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DEPARTMENT OF STATE  
TALLAHASSEE FLORIDA

SUBJECT: Builders Referral Management, 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      ☐ \$78.75  
Filing Fee      Filing Fee  
                         & Certificate of Status

☐ \$78.75      ☒ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                         & Certificate of  
                         Status  
**ADDITIONAL COPY REQUIRED**

FROM: Raymond J. Parson  
Name (Printed or typed)

755 Broad Court North  
Address

Naples, FL 34102  
City, State & Zip

239-398-1406  
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:  
Builders Referral Management, Inc.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:  
755 Broad Court North  
Naples, FL 34102

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:  
Any and all legal business within the state of Florida.

### ARTICLE IV SHARES

The number of shares of stock is:  
1,000 (one thousand)

### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Raymond J. Parson, Pres.  
755 Broad Court North  
Naples, FL 34102

Christine Parson, Treasurer  
755 Broad Court North  
Naples, FL 34102

### ARTICLE VI REGISTERED AGENT

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

Nancy Reynolds, CPA  
Reynolds & Associates CPAs, P.A.  
8955 Fontana Del Sol Way  
Naples, FL 34109

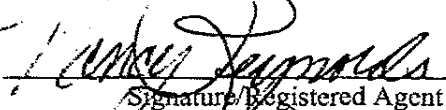
### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

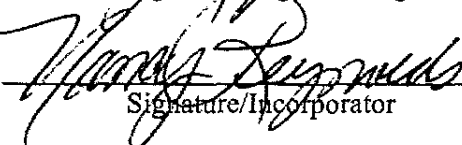
Reynolds & Associates CPAs, P.A.  
8955 Fontana Del Sol Way  
Naples, FL 34109

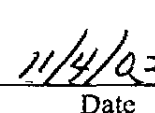
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*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*

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

  
\_\_\_\_\_  
Date

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

  
\_\_\_\_\_  
Date

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