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TRANSMITTAL LETTER

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

SUBJECT: Protective Factors 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: Anthony Bragalia
Name (Printed or typed)

4166 Central Sarasota Parkway, Suite 533
Address

Sarasota, Florida 34238
City, State & Zip

941-918-1404
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:

Protective Factors Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

4166 Central Sarasota Parkway, Sarasota, FL 34238

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Development of Dietary/Nutraceutical Supplements

ARTICLE IV SHARES

The number of shares of stock is:

200,000 Shares

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

President: Anthony Bragalia, 4166 Central Sarasota Parkway, Sarasota, FL 34238, Suite 533

Treasurer: John Mulcahy, 95 Lewis Ave., Walpole, MA 02081

Clerk: John Mulcahy, 95 Lewis Ave., Walpole, MA 02081

Directors: Luke Angelus, 15 Trailside Rd., Medfield, MA 02052

Karl Wohler, 7 Wycliffe Rd., East Walpole, MA 02081

ARTICLE VI REGISTERED AGENT

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

Anthony Bragalia, 4166 Central Sarasota Parkway, Sarasota, FL 34238
Suite 533

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Anthony Bragalia, 4166 Central Sarasota Parkway, Sarasota, FL 34288
Suite 533

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

x Anthony Bragalia
Signature/Registered Agent

January 5, 2004
Date

x Anthony Bragalia
Signature/Incorporator

January 5, 2004
Date

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
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