

PO4000033949

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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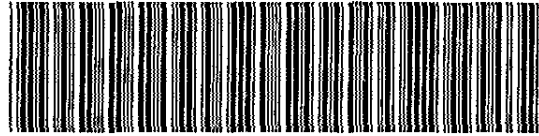
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

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

SUBJECT: Danny Bryant's Pump Repair, Incorporated

(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: Brian Johnson
Name (Printed or typed)

194 Martin Luther King Avenue
Address

Crestview, FL 32536
City, State & Zip

(850) 683-1148
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:

Danny Bryant's Pump Repair, Incorporated

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

1120B Hospital Road
Fort Walton Beach, FL 32548

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To provide high quality pump and sprinkler system repair and installation to customers in our service area.

ARTICLE IV SHARES

The number of shares of stock is:

one (1)

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Danny L. Bryant, Owner
1120B Hospital Road
Fort Walton Beach, FL 32548

ARTICLE VI REGISTERED AGENT

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

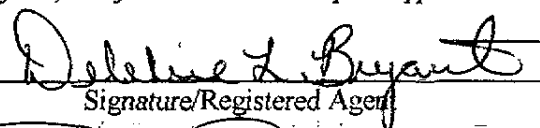
Mrs. Debbie Bryant
1120B Hospital Road
Fort Walton Beach, FL 32548

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Brian Johnson, Owner
The Tax House
194 Martin Luther King Jr Avenue
Crestview, FL 32536

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

1/19/04
Date


Signature/Incorporator

1.16.03
Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA