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(Requestor's Name)	_
(Address)	_
(Address)	
(City/State/Zip/Phone #)	_
PICK-UP WAIT MAIL	
(Business Entity Name)	_
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
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SECRETARY OF STATE

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TRANSMITTAL LETTER

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

SUBJECT:	Brian DE CORPORA	TENAME-MUSTINGL	noseintoxo
Enclosed are an orig	rinal and one (1) copy of the arti	cles of incorporation and	l a check for:
S70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED
FROM:	Brian McCli	Sh (Printed or typed)	
•	726 Cassada Lake Helen	State & Zip	
	386-956-7342	Jas 386-328	-0522

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



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

October 19, 2004

BRIAN MCCLISH 726 CASSADAGA RD. LAKE HELEN, FL 32744

SUBJECT: BRIAN MCCLISH INC. Ref. Number: W04000038391

We have received your document for BRIAN MCCLISH INC.. However, the document has not been filed and is being returned for the following:

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6934.

Loria Poole Document Specialist New Filings Section

Letter Number: 704A00059917

ARTICLE I NAME The name of the corporation shall be: ARTICLE I NAME The name of the corporation shall be: ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 726 Cassadaga Rd, Lake Helen FJ, 32744 ARTICLE III PURPOSE The purpose for which the corporation is organized is:

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ARTICLE IV SHARES The number of shares of stock is: 100 ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): Brian medish margaret mitchell 126 cassadaza Rd. Lake Helen, FJ. 32744 726 Cassadaga Rd. Lake Helen, F.D. 32744 *President Treasure * Vice President & Secretary ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Brian McClish Rd. Lake Helen F1.3274X ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Brian mcclish Inc. Lake Helen F1. 32744 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

Busine/Registered Agent

Signature/Registered Agent

Date

10.12-04

Date

10.13-04

Date