

P0400015686d

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

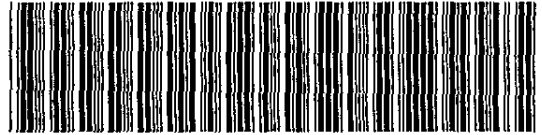
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700042484757

11/12/04--01017--015 **78.75

FILED
04 NOV 12 PM 3:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11/17/04

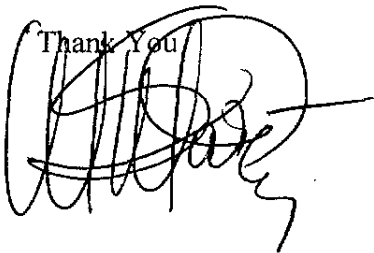
State of Florida
Dept of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Sirs:

Find attached an application for Registration of Corporation of: **BRM FAMILY INVESTMENT GROUP CORP.** Find enclosed payment of:

Filing Fees	\$ 35.00
Registered Agent Designation	\$ 35.00
Certified Copy	\$ 8.75
TOTAL	\$ 78.75

Please remit the Certified Copy to the address of record.

Thank You


MADELYN MARTINEZ
15480 SW 59 ST
MIAMI, FL 33193

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:
BRM FAMILY INVESTMENT GROUP CORP.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:
15480 SW 59TH STREET, MIAMI, FL 33193

ARTICLE III PURPOSE

The pourpose for which the corporation is organized is:
DIVERSIFIED SERVICES

ARTICLE IV SHARES

The number of shares of stock is: **100**

ARTICLE V INITIAL OFFICERS/DIRECTORS

The name(s) and address(es):
MADELYN S. MARTINEZ (PRESIDENT)
NORMA C. MARTINEZ (VICE PRESIDENT)
15480 SW 59 STREET, MIAMI, FL 33193

ARTICLE VI TERM OF EXISTENCE

This corporation will exist perpetually

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:
MADELYN MARTINEZ; 15480 SW 59 STREET, MIAMI, FL 33193

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:
MADELYN MARTINEZ;
15480 SW 59 ST, MIAMI, FL 33193

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

04 NOV 12 PM 3:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA