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# TRANSMITTAL LETTER

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

SUBJECT: Brick F	Pavers R Us Inc.		
	(PROPOSED CORPORA	TE NAME – MUSTINCL	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the arti	cles of incorporation and	a check for:
□ \$70.00 Filing Fee		\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED
FROM:	Jeffrey J. Clahane Name (Printed or typed)		
	18121 NW 16th Street	Address	
	Pembroke Pines, Florida 33029 City,	State & Zip	
	954-895-8812		

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

Daytime Telephone number

# 05 FEB 10 PM 4: 15

# 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:

Brick Pavers R Us Inc.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 18121 NW 16th St. Pembroke Pines Florida 33029

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Installation of Brick Pavers

### ARTICLE IV SHARES

The number of shares of stock is:

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Jeffrey J. Clahane President 18121 NW 16th St. Pembroke Pines, FI 33029

### ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Jeff Clahane 18121 NW 16th St. Pembrke Pines, Fl. 33029

### ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

Jeff Clahane 18121 NW 16th St. Pembroke Pines, FI 33029

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/Incorporator

Date