

PS 000031933

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

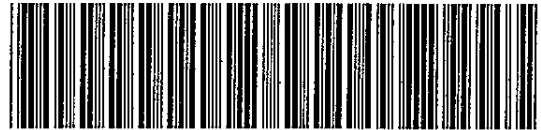
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Batch Work
2-14-05

Office Use Only



900046430469

02/15/05--01001--009 **87.50

FILED
05 FEB 14 AM 10:47

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION
05 MAR -2 AM 10:40

2/15-9619

2/16

TRANSMITTAL LETTER

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

SUBJECT: BRIANNA LAIC
(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: MARCY GARCIA
Name (Printed or typed)
17789 LAKE CARLTON DRIVE APT C
Address
TAMPA FLORIDA 33558
City, State & Zip
(813-766-3710) (813-385-6933)
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

REC 5D
05 MAR PM 12:01

February 24, 2005

MARCY GARCIA
17789 LAKE CARLTON DRIVE
APT C
TAMPA, FL 33558

SUBJECT: BRIANNA INC
Ref. Number: W05000009619

We have received your document for BRIANNA INC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document must contain a registered agent with a Florida street address and a signed statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

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) 245-6972.

Doris Brown
Document Specialist
New Filings Section

Letter Number: 905A00012994

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION

05 MAR -2 AM 10:40

ARTICLE I NAME

The name of the corporation shall be:

BRIANNA G INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

17789 LAKE CARLTON DR. #C
TAMPA, FL 33558

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is:

2

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

MARCY GARCIA
17789 LAKE CARLTON DR., APT. C
TAMPA, FL 33558

ARTICLE VI REGISTERED AGENT

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

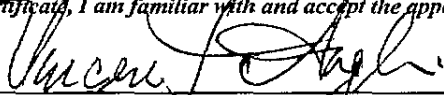
VINCENT ANGLIN
1026 WEST HILLSBOROUGH AVENUE
TAMPA, FL 33603

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

MARCY GARCIA
17789 LAKE CARLTON DR., APT. C
TAMPA, FL 33558

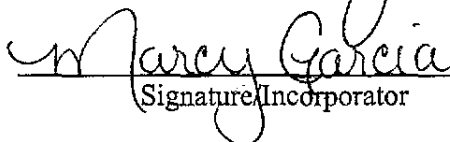
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

2-9-05

Date



Signature/Incorporator

2-9-05

Date