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PICK-UP	☐ WAIT	MAIL.		
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Certified Copies	Certificates	of Status		
Special Instructions to F	iling Officer:			
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SELVARASSEE, FLORIDA

Office Use Only

5/9/05 pux

# TRANSMITTAL LETTER

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

SUBJECT: BRO	IPTON81 INC		
	(PROPOSED CORPORA	TE NAME - <u>MUST INCL</u>	
Enclosed are an orig	inal and one (1) copy of the arti	cles of incorporation and	a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	✓ \$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED
FROM∙ SH	ELLY OGILVIE		
rkowi	Name	(Printed or typed)	
	17093 NW 15 STREET	Address	
	PEMBROKE PINES, FL 33028 City,	State & Zip	
	954 701 3247		
	Daytime T	elephone 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)

PARTS ( 173,473 ( 178 )

### ARTICLE I NAME

The name of the corporation shall be:

**BROMPTON81 INC** 

SECUL WARE OF STATE TALLAHASSEE, FLORIDA

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#### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 17093 NW 15 STREET PEMBROKE PINES, FL 33028

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is: INVESTMENTS AND MARKETING

#### 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):

SHELLY OGILVIE 17093 NW 15 STREET, PEMBROKE PINES, FL 33028

DIRECTOR

# ARTICLE VI REGISTERED AGENT

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

SHELLY OGILVIE

17093 NW 15 STREET, PEMBROKE PINES, FL 33028

#### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

SHELLY OGILVIE

17093 NW 15 STREET, PEMBROKE PINES, FL 33028