P0500007284Z

(Re	equestor's Name)	
(Ac	idress)	
(Ad	Idress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer;	
Pos'od		
	Office Use Onl	lv.



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05/09/05--01026--020 **78.75

OS MAY 18 AM 7: 39
SECRLIARY OF STATE

T. BURCH WAY 1.9 ZUIS

TRANSMITTAL LETTER

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

CT: Brick Cr	reations, Inc (PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
d are an orig	inal and one (1) copy of the art	icles of incorporation and	l a check for:
□ \$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status		\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED
FROM: Jus	tin M Estes	(Printed or typed)	
<u> </u>	5344 Stanford Rd	Address	
<u>.</u>	Jacksonville, Florida 32207	, State & Zip	· .
c	904-349-3431		

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

Daytime Telephone number





RECEIVED

FLORIDA DEPARTMENT OF STATE MAY 18 AM 9:55

Glenda E. Hood Secretary of State

May 12, 2005

医二酰甲酰胺 经净售 WHITN CHAIL PERMAN THE PARTY SERVICE OF CHARLES

JUSTIN M ESTES 5344 STNFORD RD JACKSONVILLE, FL 32207

SUBJECT: BRICK CREATIONS, INC.

Ref. Number: W05000024008

We have received your document for BRICK CREATIONS, INC. and your check(s) totaling \$78.75. 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 administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with a notarized affidavit stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

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

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) 245-6928.

Tim Burch **Document Specialist** New Filings Section

Letter Number: 205A00034186

OS MAY 18 AM 7: 39 SECRETARY OF STATE FOR ORDER

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:

Justin Estes, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 5344 Stanford Rd Jacksonville, FL 32207-7856

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:

1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Justin Estes, 5344 Stanford Rd, Jacksonville, FL 32207, President

ARTICLE VI REGISTERED AGENT

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

Justin Estes 5344 Stanford Rd Jacksonville, FL 32207-7856

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Justin Estes 5344 Stanford Rd Jacksonville, FL 32207-7856

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