P05000134620

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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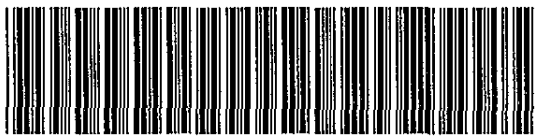

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09/29/05--01016--003 **87.50

FILED
05 SEP 30 AM 9:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Cf. 10-4

TRANSMITTAL LETTER

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

SUBJECT: CID, CORP.
(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: BRETT R. BJERKE
Name (Printed or typed)

P.O. BOX 366821
Address

BONITA SPRINGS, FL 34136
City, State & Zip

239-495-2216
Daytime Telephone number

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

FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

August 31, 2005

BRETT R. BJERKE
P.O. BOX 366821
BONITA SPRINGS, FL 34136

SUBJECT: C I D, CORP.
Ref. Number: W05000040915

We have received your document for C I D, CORP. 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 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 an affidavit or letter 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) 245-6047.

Carolyn Lewis
Document Specialist
New Filings Section

Letter Number: 105A00054779

ARTICLES OF INCORPORATION

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

CID SW, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

24345 MELAINE LN.
BONITA SPRINGS, FL 34135

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL PURPOSES FOR WHICH A CORPORATION CAN BE FORMED.

ARTICLE IV SHARES

The number of shares of stock is:

100 SHARES

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

BRETT BJERKE, PRESIDENT
24345 MELAINE LN.
BONITA SPRINGS, FL 34135

LAURA BJERKE, V.P., SEC., TREAS
24345 MELAINE LN.
BONITA SPRINGS, FL 34135

ARTICLE VI REGISTERED AGENT

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

BRETT R. BJERKE
24345 MELAINE LN.
BONITA SPRINGS, FL 34135

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

BRETT R. BJERKE
24345 MELAINE LN.
BONITA SPRINGS, FL 34135

****

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 Brett R. Bjerke — Date 8-23-05

Signature/Incorporator Brett R. Bjerke — Date 8-23-05