

PO6000132332

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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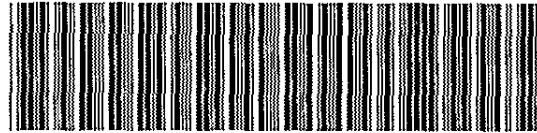
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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06 OCT 12 AM 10:29
CLERK OF STATE
TALLAHASSEE, FLORIDA

D. WHITE OCT 18 2006

COVER LETTER

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

SUBJECT: BROTHERS & PARTNERS, INC

(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: IVAN MOLINA

Name (Printed or typed)

7974 NW 186 TERR

Address

MIAMI, FLORIDA 33015

City, State & Zip

786-256-8474

Daytime Telephone 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)

ARTICLE I NAME

The name of the corporation shall be:

BROTHERS & PARTNERS, INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

7974 NW 186 TERRACE, MIAMI, FLORIDA. 33015

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

REAL ESTATE INVESTMENTS AND DEVELOPMENT

ARTICLE IV SHARES

The number of shares of stock is:

5

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

IVAN MOLINA , 7974 NW 186 TERRACE, MIAMI, FLORIDA. 33015—PRESIDENT

ARTICLE VI REGISTERED AGENT

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

IVAN MOLINA 7974 NW 186 TERR, MIAMI, FLORIDA, 33015

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

IVAN MOLINA 7974 NW 186 TERRACE, MIAMI, FLORIDA. 33015

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

Signature/Incorporator

Date

Date

FILED
06 OCT 12 AM 10:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA