

P07000077264

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

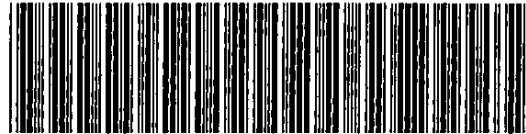
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

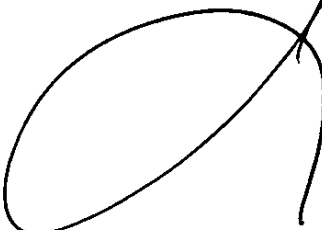
Office Use Only



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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

 7/6 —

COVER LETTER

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

SUBJECT: Bryan Mullins, P.A.

(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: Bryan Mullins

Name (Printed or typed)

305 Glen Ridge Avenue

Address

Temple Terrace, FL 33617

City, State & Zip

813.892.2112

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:

Bryan Mullins, P.A.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

305 Glen Ridge Avenue
Temple Terrace, FL 33617

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Contractor

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):

Bryan Mullins
305 Glen Ridge Avenue
Temple Terrace, FL 33617

ARTICLE VI REGISTERED AGENT

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

Bryan Mullins
305 Glen Ridge Avenue
Temple Terrace, FL 33617

ARTICLE VII INCORPORATOR

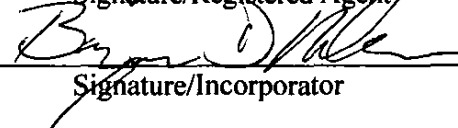
The name and address of the Incorporator is:

Bryan Mullins
305 Glen Ridge Avenue
Temple Terrace, FL 33617

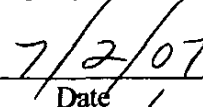
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



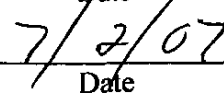
Signature/Registered Agent



Signature/Incorporator



Date



Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA