## P0700081039

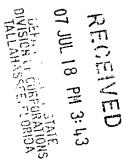
(R	equestor's Name)
(A	ddress)
(A	ddress)
(C	city/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(B	susiness Entity Name)
(D	Oocument Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:
<u> </u>	

Office Use Only



800105315748

07/19/07--01001--008 \*\*70.00



O7 JUL 18 PM 3: 53
SEURE DARY OF STALL

m 57/10/107

## **COVER LETTER**

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

(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 **\$78.75 \$78.75** \$87.50 Filing Fee Filing Fee Filing Fee Filing Fee, & Certificate of Status & Certified Copy Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED Name (Printed or typed)

1108 D. Orangt a

Address

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

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)
The name of the corporation shall be:  House of Brown Famel Services, I
ARTICLE II PRINCIPAL OFFICE  The principal place of business/mailing address is:
1108 W. Drane Ave
The purpose for which the corporation is organized is:  Landaut (mend 5 and 1977)
ARTICLE IV SHARES The number of shares of stock is:
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS  List name(s), address(es) and specific title(s):  ARTICLE VI REGISTERED AGENT
ARTICLE VI REGISTERED AGENT  The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:  While E. Brown  Tall, 17310
ARTICLE VII INCORPORATOR  The name and address of the Incorporator is:  William E Brown  ILOB W. Drange Arte T-all, 1-1, 32310
**************************************
Signature/Incorporator Date