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| (Re                     | equestor's Name)                      |               |
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| (Ci                     | ty/State/Zip/Phone                    | · #)          |
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| PICK-UP                 | ☐ WAIT                                | MAIL          |
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| (Bu                     | usiness Entity Nam                    | ne)           |
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| (Do                     | ocument Number)                       |               |
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| Certified Copies        | Cartificates                          | of Status     |
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| Special Instructions to | Filing Officer:                       |               |
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## FLORIDA DEPARTMENT OF STATE Division of Corporations

RECEIVED 07 OCT 15 AM 11: 42

DEPARTMENT OF STATE DIVISION OF CORPORATIONS TAI LAHASSEE, ELORIDA

October 5, 2007

JOHN B OGLESBY 2810 SALISBURY BLVD. WINTER PARK, FL 32789

SUBJECT: ORANGE COUNTY BRICK PAVERS, INC.

Ref. Number: W07000049494

We have received your document for ORANGE COUNTY BRICK PAVERS, INC. 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 document must contain a registered agent with a Florida street address and a <u>signed</u> statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

Please return the corrected 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) 245-6870.

Karen Saly Regulatory Specialist II New Filing Section

Letter Number: 907A00058407

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Please return the corrected original and one dony of your document, tileng which copy of this letter, within 50 days or your filing will be considered abandoned.

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## **COVER LETTER**

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

| SUBJECT:                 |   |                   | BKISK                |                | The                       |  |  |
|--------------------------|---|-------------------|----------------------|----------------|---------------------------|--|--|
| _                        | (PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX) |                   |                      |                |                           |  |  |
|                          |   |                   |                      |                |                           |  |  |
|                          |   |                   |                      |                |                           |  |  |
| Enclosed are an ori      | iginal and one (1)                              | copy of the artic | les of incorporation | on and a check | for:                      |  |  |
| □ \$70.00                | \$78.75   |                   | <b>\$78.75</b>       | <b>12</b> \$87 | 7.50                      |  |  |
| Filing Fee               | Filing Fee                                      |                   | Filing Fee           | Filing         | g Fee,                    |  |  |
|                          | & Certificate                                   | of Status         | & Certified Co       |                | fied Copy<br>rtificate of |  |  |
|                          |   |                   |                      | Statu          | S                         |  |  |
|                          | ADDITIONAL COPY REQUIRED                        |                   |                      |                |                           |  |  |
|                          |   | •                 |                      |                |                           |  |  |
|                          |   |                   |                      |                |                           |  |  |
| FROM:                    | 4HOC  | 3.0               | <b>GLESBY</b>        |                |                           |  |  |
|                          | Name (Printed or typed)                         |                   |                      |                |                           |  |  |
| 2810 SALISBURY BUD       |   |                   |                      |                |                           |  |  |
| Address                  |   |                   |                      |                |                           |  |  |
|                          |   |                   |                      |                |                           |  |  |
|                          | WINTER  |                   | ,FL 32               | 789            |                           |  |  |
| City, State & Zip        |   |                   |                      |                |                           |  |  |
| 407-643-8911             |   |                   |                      |                |                           |  |  |
| 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:

ORANGE COUNTY BRICK PAVERS, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

2810 SALISBURY BLUD WINTER PARK, FL 32789

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

SELL & INSTALL BRICK PAVERS

ARTICLE IV SHARES

The number of shares of stock is: 10

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

JOHN R. OBLESSY - PRESIDENT

2810 SALISBURY BLUD

WINTER PARK, FL 32789

ARTICLE VI REGISTERED AGENT

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

| Blo Salisbary Blod | Blod | Blod | Blod Salisbary Blod Salisbary Blod | Blod Salisbary Blod Salisbary Blod | Blod Salisbary Blod

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SECRETARY OF STATE