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ALLAHASSEE, ELOPIN

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COVER LETTER

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

SUBJECT: BER	T & TOM , INC.			
	(PROPOSED CORPO	RATE NAME – <u>MUST INC</u> L	UDE SUFFIX)	
Enclosed are an or	riginal and one (1) copy of the ar	ticles of incorporation a	and a check for:	
☐ \$70.00 Filing Fee		X \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
-				
FROM	rinted or typed)			
		2 SW 53RD TERRACE		
_	Address			
	MIAMI , FL 33185			
	City, State & Zip			
	(305) 229-0684			
	Daytime Telephone number			

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

BERT & TOM, INC.

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:

BERT & TOM, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

16332 SW 53RD TERRACE

MIAMI, FL 33185

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

exclusively for graphics, web designing, 3-D and 2-D animation purposes within the meaning of 501(c)(3) of the Internal Revenue Code, as may be amended.

ARTICLE IV SHARES

The number of shares of stock is:

200

ARTICLE V. INITIAL OFFICERS AND/OR DIRECTORS

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

CHINNAPPAN MAHIMAIDOSS 16332 SW 53RD TERRACE MIAMI , FL 33185

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: CHINNAPPAN MAHIMAIDOSS
16332 SW 53RD TERRACE
MIAMI, FL 33185

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is: CHINNAPPAN MAHIMAIDOSS 16332 SW 53RD TERRACE MIAMI . FL 33185

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

Signature/Registered Agent Date

12/20/2007

12/20/2007

Signature/Incorporator Date

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OR GRETARY OF STATE
TALLAHASSEE, FLORITI