

P09000040107

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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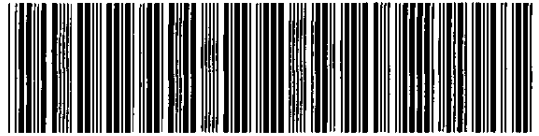
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2009 MAY -5 PM 4:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Burch MAY 6 2009

COVER LETTER

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

SUBJECT: O'BRIEN & ASSOCIATES MORTGAGE AND FINANCIAL SERVICES, 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: KATHRYN T. O'BRIEN

Name (Printed or typed)

5610 S.W. 14TH PLACE

Address

CAPE CORAL, FLORIDA 33914

City, State & Zip

239-542-9406

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:

O'BRIEN & ASSOCIATES MORTGAGE AND FINANCIAL SERVICES, INC.

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

5610 S.W. 14TH PLACE, CAPE CORAL, FLORIDA 33914

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

PURSUIT OF ANY AND ALL ACTIVITIES THAT ARE LAWFUL IN THE STATE OF FLORIDA

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):

RYAN C. O'BRIEN, PRESIDENT
2529 VERDMONT COURT
CAPE CORAL, FLORIDA 33991

KATHRYN T. O'BRIEN, VICE PRESIDENT
5610 S.W. 14TH PLACE
CAPE CORAL, FLORIDA 33914

ARTICLE VI REGISTERED AGENT

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

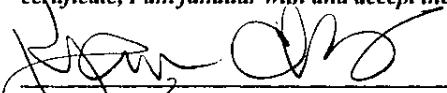
RYAN C. O'BRIEN
2529 VERDMONT COURT
CAPE CORAL, FLORIDA 33991

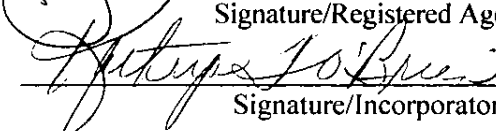
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

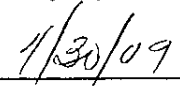
KATHRYN T. O'BRIEN
5610 S.W. 14TH PLACE
CAPE CORAL, FLORIDA 33914

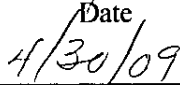
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent


Signature/Incorporator



Date


Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA