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(Business Entity Name)

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DIVISION OF CORPORATIONS
2010 NOV 15 PM 4:31

11/17/10

COVER LETTER

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

SUBJECT: Scott Bryner, PA
(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: Scott Bryner
Name (Printed or typed)
200 Agnes Court, #7
Address
Orlando , FL 32801
City, State & Zip
407-462-8963
Daytime Telephone number
Scbryner@gmail.com
E-mail address: (to be used for future annual report notification)

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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)

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ARTICLE I NAME

The name of the corporation shall be: Scott Bryner, PA

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

200 Agnes Ct., #7

Orlando, FL 32801

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

property appraisals

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Scott Bryner President

Name and Title: _____

Address: 200 Agnes Ct., #7

Address: _____

Orlando, FL 32801

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Scott Bryner

Address: 200 Agnes Ct., #7

Orlando, FL 32801

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Scott Bryner

Address: 200 Agnes Ct., #7

Orlando, FL 32801

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

✓ Scott Bryner
Required Signature/Registered Agent

✓ 11/8/10
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

✓ Scott Bryner
Required Signature/Incorporator

✓ 11/8/10
Date