# P10000102447

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		

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HO DEC 20 PM 4: 40 SECRETARY OF STATE

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Office Use Only

# **COVER LETTER**

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

# SUBJECT: Bankers Marine Center, 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

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\$78.75	\$87.50
\$78.75 Filing Fee	Filing Fee,
& Certified Copy	Certified Copy
	& Certificate of
	Status
ADDITIONAL C	OPY REQUIRED

FROM: Daniel L. Bertucelli

Name (Printed or typed)

6610 N. University Drive, Suite 250 Address

Tamarac, FL 33321

City, State & Zip

954-580-0880

Daytime Telephone number

brd33328@aol.com E-mail address: (to be used for future annual report notification)

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

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### J. THOMAS CARDWELL . COMMISSIONER

STREET ADDRESS: 101 East Gaines Street, Suite 636 • PHONE (850) 410-9800 • FAX (850) 410-9548 MAILING ADDRESS: Division of Financial Institutions, 200 East Gaines Street, Tallahassee, FL 32399-0371 Visit us on the web: <u>www.FLOFR.com</u> • Toil Free: (800) 848-3792

December 15, 2010

Mr. Douglas Banker 9301 S.W. 55<sup>th</sup> Court Cooper City, Florida 33328

Re: Bankers Marine Center

Dear Mr. Banker:

Thank you for your recent letter/fax requesting approval for use of the above-referenced name.

It is the opinion of this Office that the above-referenced corporate name is definitive enough to differentiate the business being conducted from that of a commercial bank or trust company. Therefore, the Office does not object to your use of the above-referenced name being registered to conduct business in the state of Florida. However, this does not give one the authority to act in any licensed capacity until all licensing requirements have been met within this state.

Sincerely,

Linda B. Charity Director

LBC:bk

cc: Karon Beyer, Chief, Bureau of Commercial Recordings, Division of Corporations, Department of State

CHARLIE CRIST BILL MCCOLLUM

FINANCIAL SERVICES COMMISSION

ALEX SINK

HARLES BRONSON

# ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME Bankers Marine Center, Inc.

The name of the corporation shall be:

# ARTICLE II PRINCIPAL OFFICE

Principal street address 9301 SW 55 Court Cooper City, FL 33328 Mailing address, if different JARY OF STATE SAME IAULAHASSEF FL ORIDA

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## ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Any and All Lawful Business.

#### ARTICLE IV SHARES

The number of shares of stock is:1000 Shares

#### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title Address:	Douglas Banker, PSTD 9301 SW 55 Court Cooper City, FL 33328	Address:	
Name and Title Address:		A	
Name and Title Address:	2 2	Name and Title: Address:	

#### ARTICLE VI REGISTERED AGENT

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

Name:	Douglas Banker
Address:	9301 SW 55 Court
	Cooper City, FL 33328

### ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is: Name: <u>Douglas Banker</u> Address: <u>9301 SW 55 Court</u> <u>Cooper City, FL 33328</u>

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

Required Signature/Registered Agent

12-15-2010 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 fo the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Required Signature/Incorporator

12-15-2010 Date