

P110000006877

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

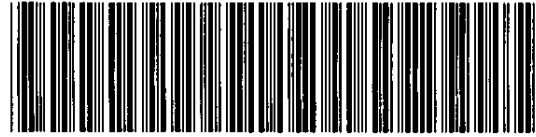
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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Office Use Only



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11 JAN 21 PM 2:11

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

FILED

11 JAN 21 PM 2:24

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

PS 1/21/11

## COVER LETTER

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

SUBJECT: Brill's Plumbing Co 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: Jarin Brill  
Name (Printed or typed)

7998 Mahan Drive  
Address

Tallahassee Florida 32309  
City, State & Zip

850-878-1234  
Daytime Telephone number

Jarin Brill@yahoo.com  
E-mail address: (to be used for future annual report notification)

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

I, Jarin Brill will not Revoke the  
dissolution of Brill's Plumbing Co INC  
Doc # P07000093712 + I Release  
the Name for use.

Jarin Brill

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:

Brill's Plumbing CO Inc

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**ARTICLE II PRINCIPAL OFFICE**

Principal street address

7998 Mahan Drive

Tallahassee FL 32309

Mailing address, if different

DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Plumbing

**ARTICLE IV SHARES**

The number of shares of stock is:

700

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

Name and Title: Jarin Brill President

Address: 7998 Mahan Drive

Tallahassee FL 32309

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

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: Jarin Brill

Address: 7998 Mahan Drive

Tallahassee FL 32309

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Jarin Brill

Address: 7998 Mahan Drive

Tallahassee FL 32309

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:

Jarin Brill

Required Signature/Registered Agent

1-21-2011  
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.

Jarin Brill

Required Signature/Incorporator

1-21-2011  
Date