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(Requestor's Name)	
(requestor s Harrie)	
(Address)	
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(City/State/Zip/Phone #)	
PICK-UP WAIT M	IAIL
(Business Entity Name)	
(Document Number)	
	•
Certified Copies Certificates of Status _	
	-
Special Instructions to Filing Officer:	

Office Use Only



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06/24/11--01009--008 **78.75

SECRETARY OF STATE DIVISION OF CORPORATION

g 6/27/11

COVER LETTER

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

_{SUBJECT:} Brooklyn's Best, Inc.	
(PROPOSED CORPORA	TE NAME – <u>MUST INCLUDE SUFFIX</u>)
Enclosed are an original and one (1) copy of the arti	cles of incorporation and a check for:
\$70.00 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED
FROM: Debra Ann Deal	(Printed or typed)
2190 Corporate Square	#2 Address
Naples, Florida 34109 City,	State & Zip
Daytime T	elephone number

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

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

2011 JUN 24 PM 3: 26

SECRETARY OF STATE

ARTICLES OF INCORPORATIONIn compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

SECRETARY OF STATE DIVISION OF CORPORATION:

ARTICLE I NAME Brooklyn's Best, Inc.			OF CORPORATION OF CORPORATION	
The name of the c	corporation shall be:		2011 JUN 24	PM 3: 26
ARTICLE II	PRINCIPAL OFFICE			111 3. 20
	Principal street address	Mailing add	ress, if different is:	
	2190 Corporate Square #2			
•	Naples, Florida 34109	"		
ARTICLE III				
	which the corporation is organized is:			
Any and all I	lawful business			
ARTICLE IV	SHARES ares of stock is:1000			
	INITIAL OFFICERS AND/OR DIRECTOR Title: Debra Ann Deal, President			
Address:	2190 Corporate Square #2	Name and Title:		
Address.	Naples, Florida 34109			
				
Name and T	l'itle:	Name and Title:		
Address:		Address:		
				
Name and T	Citle:	Name and Title:		
Address:		Address:		
	·			
	REGISTERED AGENT			
	orida street address (P.O. Box NOT acceptable) o	if the registered agent is:		
	Debra Ann Deal 2190 Corporate Square #2	_		
Addiess.	2190 Corporate Square #2 Naples, Florida 34109	-		
APTICLE VII	INCORPORATOR			
	dress of the Incorporator is:			
Name:	Debra Ann Deal			
Address:	2190 Corporate Square #2			
	Naples, Florida 34109	_ _		
	ned as registered agent to accept service of proces am familiar with and accept the appointment as reg			nated in
1 Jel	Required Signature/Registered Agent		6-20-2	011
	. •		Date	
	ument and affirm that the facts stated herein are Department of State constitutes a third degree felon			ted in a
1/1/1/	en / hal		6-20-7	011
11/11/11/14	Required Signature/Incorporator		G - 20 - 20 Date	2//
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