

P110000086191

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

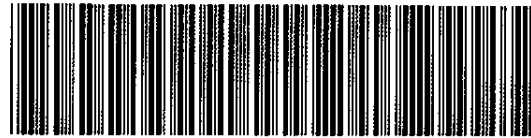
(Business Entity Name)

(Document Number)

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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

11 SEP 29 PM 4:41

SEP 29 2011

9/30

JB

## COVER LETTER

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

**SUBJECT: Bradley Berens Corp**

(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: **Bradley Berens**

Name (Printed or typed)

**10475 Laxton St**

Address

**Orlando, FL 32824**

City, State & Zip

**321-363-6457**

Daytime Telephone number

**theg33k@gmail.com**

E-mail address: (to be used for future annual report notification)

**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: **Bradley Berens Corp**

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
10475 Laxton St  
Orlando, FL 32824

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

The Corporation is formed for the transaction of any or all lawful business for which Corporations may be incorporated under this chapter.

**ARTICLE IV SHARES**

The number of shares of stock is: **1000**

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

|  |                       |
|--|-----------------------|
| Name and Title: <u>Bradley Berens, President, Treasurer, Secretary</u> | Name and Title: _____ |
| Address: <u>10475 Laxton St</u>  | Address: _____        |
| <u>Orlando, FL 32824</u>   | _____                 |

|                       |                       |
|-----------------------|-----------------------|
| 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: Bradley Forrest Berens  
Address: 10475 Laxton St  
Orlando, FL 32824

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Bradley Forrest Berens  
Address: 10475 Laxton St  
Orlando, FL 32824

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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*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*

 Bradley F. Berens  
Required Signature/Registered Agent

9/26/2011  
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.*

 Bradley F. Berens  
Required Signature/Incorporator

9/26/2011  
Date