

P 12000004354

(Requestor's Name)

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(City/State/Zip/Phone #)

☐ PICK-UP

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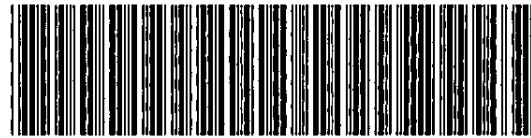
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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12 JAN 11 PM 4:05
CLERK OF STATE
TALLAHASSEE, FLORIDA

Jan 11/12/12

COVER LETTER

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

SUBJECT: **Berry Packaging, 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: **Vance D. Fairbanks, Jr.**

Name (Printed or typed)

5110 w. Idlewild Av

Address

Tampa Florida 33634-8024

City, State & Zip

813/ 765-9441

Daytime Telephone number

davidfairbanks57@aol.com

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

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

12 JAN 11 PM 4:05

FILED

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: **Berry Packaging, Inc.**

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12 JAN 11 PM 4: 05

ARTICLE II PRINCIPAL OFFICE

Principal street address
5110 w. Idlewild Av
Tampa FL 33634-8024

Mailing address, if different is:
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To manufacture, warehouse, distribute, sell and/or consult on corrugated cartons, pads, partitions and die-cuts; to include, but not limited to: interior packaging, foam fabrication and other related packaging supplies.

ARTICLE IV SHARES

The number of shares of stock is: **100**

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Vance D. Fairbanks Jr. Pres

Address:

5110 w. Idlewild Av
Tampa FL 33634-8024

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: Denise Fairbanks

Address: 5110 w. Idlewild Av
Tampa FL 33634-8024

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Vance D. Fairbanks, Jr

Address: 5110 w. Idlewild Av
Tampa FL 33634-8024

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

Denise Fairbanks

Required Signature/Registered Agent

1/6/2012
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.

Vance D. Fairbanks, Jr

Required Signature/Incorporator

Jan. 6, 2012
Date