

W12000037030

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(Requestor's Name)

\_\_\_\_\_  
(Address)

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(Address)

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(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

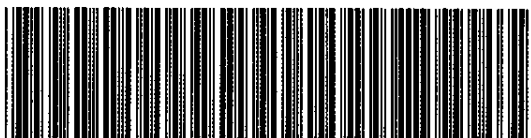
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



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04/06/12--01014--007 \*\*78.75

12 APR 18 PM 4:08  
SECTION 501(c)(3)  
DIVISION OF REVENUE  
STATE OF NEW YORK

4/19  
B

W12000019696

## COVER LETTER

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

SUBJECT: Brothers Pool and Services 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: Loadmy Torralvo

Name (Printed or typed)

4351 SW 24 ST

Address

Fort Lauderdale, FL 33317

City, State & Zip

954-347-2050

Daytime Telephone number

leotorralvo@yahoo.com

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

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED  
12 APR 18 AM 11:26

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

April 9, 2012

LOADMY TORRALVO  
4351 SW 24 ST  
FORT LAUDERDALE, FL 33317

SUBJECT: BROTHERS POOL AND SERVICES INC.  
Ref. Number: W12000019696

We have received your document for BROTHERS POOL AND SERVICES INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Jessica A Fason  
Regulatory Specialist II

Letter Number: 212A00011326

# ARTICLES OF INCORPORATION

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

## ARTICLE I NAME

Brothers Pool and Services Inc  
The name of the corporation shall be:

## ARTICLE II PRINCIPAL OFFICE

Principal street address  
4351 SW 24 ST  
Fort Lauderdale, FL 33317

Mailing address, if different is:

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:  
Pool Services, Kitchen Cabinets, and Painter

## ARTICLE IV SHARES

The number of shares of stock is: 100

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: <u>Loadmy Torralvo President</u>	Name and Title: _____
Address: <u>4351 SW 24 ST</u>	Address: _____
<u>Fort Lauderdale, FL 33317</u>	_____

Name and Title: <u>Manuel Perez Vice President</u>	Name and Title: _____
Address: <u>4931 SW 17 ST</u>	Address: _____
<u>Fort Lauderdale, FL 33317</u>	_____

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: Loadmy Torralvo  
Address: 4351 SW 24 ST  
Fort Lauderdale, FL 33317

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Loadmy Torralvo  
Address: 4351 SW 24 ST  
Fort Lauderdale, FL 33317

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

\_\_\_\_\_  
Required Signature/Registered Agent

\_\_\_\_\_  
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.

\_\_\_\_\_  
Required Signature/Incorporator

\_\_\_\_\_  
Date

FILED  
DEPT. OF STATE  
DIVISION OF CORPORATIONS  
12 APR 18 PM 4:08

4/16/2012

4/16/2012