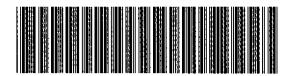
P120009237/

(Requestor's Name)			
(Address)			
(
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
Operating Chief.			
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Office Use Only

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COVER LETTER

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

SUBJECT: Brunanki, Inc.			
(PROPOSED CORPORA	FE NAME – MUST INCLUDE SUFFIX)		
Enclosed are an original and one (1) copy of the artic	cles of incorporation and a check for:		
\$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy & Certificate of Status		
	ADDITIONAL COPY REQUIRED		
FROM: Nancy Kirkland Name	(Printed or typed)		
4128 Townsend St.			
A	ddress		
Starke,FI 32091			
City, S	State & Zip		
904-533-9390			
Daytime Telephone number			
peacockcreek1@yahoo.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 Brunanki, Inc.			
The name of the	corporation shall be:			
ARTICLE II	PRINCIPAL OFFICE			
	Principal street address	Mailing a	ddress, if different is:	
	4128 Townsend St.			
	Starke,FI 32091	<u> </u>		
ARTICLE III	PURPOSE		, page 1	
	which the corporation is organized is:			
All legal business purposes.			EA TO	
J	• •			
			PA B ITT	
			<u>म</u>	
ARTICLE IV	SHARES			
The number of sh	pares of stock is: 100		M 9: 42 F STATE FLORID	
			10	
	INITIAL OFFICERS AND/OR DIRECTION Title: Nancy Kirkland, Pres./Sec.			
Address:	4128 Townsend St.	Address:		
Address.	Starke FI 32091			
Nome and	Title: Druge Widdend W.D. (Tree	Nome and Title		
Address:	Title: Bruce Kirkland, V.P./Tres. 4128 Townsend St.	Address:		
	Starke FI 32091			
Name and	Title:	Name and Title		
Address:				
ADTICLE III	REGISTERED AGENT			
	Iorida street address (P.O. Box NOT acceptate	ale) of the registered agent is:		
Name:	Bruce Kirkland	ney or the registered agent is.		
Address:	4128 Townsend St			
	Starke, Fl 32091			
ARTICLE VII	INCORPORATOR			
	dd ress of the Incorporator is:			
Name:	Nancy Kirkland			
Address:	4128 Townsend St.			
	Starke,FI 32091	·		
Having been na	med as registered agent to accept-service of p	rocess for the above stated corp	oration at the place designated in	
	am familiar with ghd accept the gopointment o			
16				
Xnu	ee Bur		10/29/12	
	Required Signature/Registered Agen	t	Date	
I submit this doc	cument and affirm that the facts stated herei	n are true. I am aware that the	false information submitted in a	
	Department of State constitutes a third degree			
Alone 1	W 4 1		4.0.0.4.5	
TIWNCY	Miller		10/29/12	
' 1	Required Signature/Incorporator		Date	