

P12000094965

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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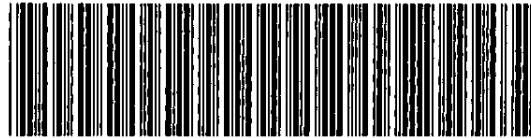
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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12 NOV 14 AM 10:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**BRUEGGER PAINTING, INC.
15822 East Wind Circle
Sunrise, FL 33326**

November 7, 2012

Department of State
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

To Whom It May Concern:

I incorporated my business online as a corporation under the name BRUEGGER PAINTING, INC.

I did not receive any notifications for the filing of the annual reports.

I have no intention of reinstating the old corporation filed under number P11000054591.

I am attaching the new Articles of Incorporation effectively immediately, along with a check for \$70.00

Should you have any questions, please do not hesitate to contact me.

Sincerely,



Lloyd Bruegger

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12 NOV 14 AM 10:45

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COVER LETTER

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

SUBJECT: BRUEGGER PAINTING, 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: Lloyd Bruegger.
Name (Printed or typed)

15822 East WIND CIRCLE
Address

SUNRISE, FL 33326
City, State & Zip

305-360-3019
Daytime Telephone number

SEABLUEKEYS @ AOL. com *or and*
E-mail address: (to be used for future annual report notification)

BrueggerpaintingInc @ yahoo.com

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: BRUEGGER PAINTING, INC.

ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address
15822 EAST WIND CIRCLE
SUNRISE, FL 33326

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 100 SHARES

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	<u>LYOYD BRUEGGER, PRESIDENT</u>	Name and Title:	_____
Address:	<u>15822 EAST WIND CIRCLE</u>	Address:	_____
	<u>SUNRISE, FL 33326</u>		_____

Name and Title:	<u>SUSAN EISENMAN, TREASURER</u>	Name and Title:	_____
Address:	<u>15822 EAST WIND CIRCLE</u>	Address:	_____
	<u>SUNRISE, FL 33326</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: SUSAN EISENMAN
Address: 15822 EAST WIND CIRCLE
SUNRISE, FL 33326

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: SUSAN EISENMAN
Address: 15822 EAST WIND CIRCLE
SUNRISE, FL 33326

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

X [Signature] Required Signature/Registered Agent

11/7/12
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.

X [Signature] Required Signature/Incorporator

11/7/12
Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12 NOV 14 AM 10:45

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