

P13000011956

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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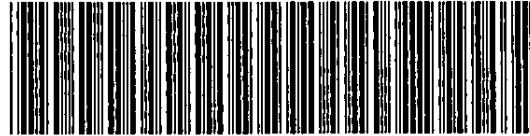
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
13 FEB -4 AM 11:45

Ps 2/6/13

COVER LETTER

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

SUBJECT: Brown Private Club 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☒ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: Kenneth W. Brown

Name (Printed or typed)

10217 Paradise Blvd

Address

Treasure Island, FL 33706

City, State & Zip

828-406-6194

Daytime Telephone number

kbgolf1@hotmail.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)

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ARTICLE I NAME

The name of the corporation shall be: Brown Private Club Services Inc.

13 FEB -4 AM 11:45

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

10217 Paradise Blvd
Treasure Island, FL 33706

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Management of Golf course and private clubs

ARTICLE IV SHARES 100

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Kenneth W. Brown, President

Name and Title: June M. Brown, Secretary & Treasurer

Address: 10217 Paradise Blvd
Treasure Island, FL 33706

Address: 10217 Paradise Blvd
Treasure Island, FL 33706

Name and Title: Kendal B. Byerly, Director

Name and Title: _____

Address: 10217 Paradise Blvd
Treasure Island, FL 33706

Address: _____

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

(cont.)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

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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: Kenneth W. Brown

Address: 10217 Paradise Blvd

Treasure Island, FL 33706

ARTICLE VII INCORPORATOR

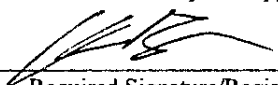
The **name and address** of the Incorporator is:

Name: Kenneth Brown

Address: 10217 Paradise Blvd

Treasure Island, FL 33706

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

1-31-13

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

1-31-13

Date