

P130000 13779

(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:

Scott Rosen **GAVE**

**AUTHORIZATION BY PHONE TO**

**CORRECT** add physical address

DATE 2/11/13

DOC. EXAM UH

613-5649

Office Use Only



200244074782

01/28/13--01032--007 \*\*78.75

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

13 FEB -8 PM 1:18

FILED

UH

## COVER LETTER

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

SUBJECT: Broward Trailers.com  
(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: Broward Trailers.com  
Name (Printed or typed)

4560 NE 11 ave  
Address

Oakland Park, Fl. 33334  
City, State & Zip

(954) 491-1907  
Daytime Telephone number

iapladders@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

January 29, 2013

SCOTT ROSEN  
4560 NE 11 AVE  
OAKLAND PARK, FL 33334

SUBJECT: BROWARD TRAILERS.COM  
Ref. Number: W13000005649

We have received your document for BROWARD TRAILERS.COM 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 name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

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 the corrected original and one copy of 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.

Valerie Herring  
Regulatory Specialist II  
New Filing Section

Letter Number: 113A00002210

**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: Broward Trailers.com INC

**ARTICLE II PRINCIPAL OFFICE**  
Principal street address

4560 NE 11 Ave  
Oakland Park, Fl. 33334

Mailing address, if different is:

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE III PURPOSE**  
The purpose for which the corporation is organized is:

The PURPOSE OF THIS COMPANY IS TO MANUFACTURE TRAILERS

**ARTICLE IV SHARES**  
The number of shares of stock is:

100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address Scott Rosen (P) Address: \_\_\_\_\_

4560 NE 11 Ave

Oakland Park, Fl. 33334

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address \_\_\_\_\_ Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address \_\_\_\_\_ Address: \_\_\_\_\_

(conti.)

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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TALLAHASSEE, FLORIDA

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Scott Rosen

Address: 4560 NE 11 Ave

Oakland Park, Fl. 33334

**ARTICLE VII INCORPORATOR**

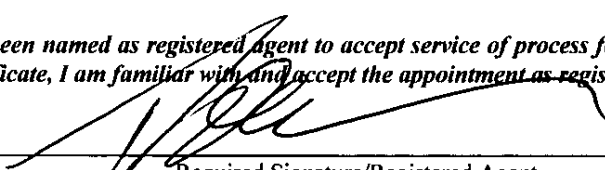
The name and address of the Incorporator is:

Name: Scott Rosen

Address: 4560 NE 11 Ave

Oakland Park, Fl. 33334

*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*

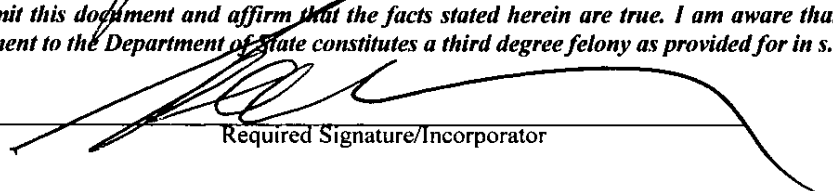


\_\_\_\_\_  
Required Signature/Registered Agent

1/24/2013

\_\_\_\_\_  
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

01/24/2013

\_\_\_\_\_  
Date