P130000 43145

(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:				

Office Use Only



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1 STATORE MAY 15 2013



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 29, 2013

THOMAS BRENNAN 2208 APSEN WAY BOYNTON BEACH, FL 33436

SUBJECT: SHUTTERBUG HURRICANE SHUTTER SERVICES INC

Ref. Number: W13000025087

We have received your document for SHUTTERBUG HURRICANE SHUTTER SERVICES INC and your check(s) totaling \$87.50. 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 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.

Justin M Shivers Regulatory Specialist II New Filing Section

Letter Number: 413A00010275

COVER LETTER

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

SUBJECT: ShutterBug Hurricane Shutter Services Inc. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

\$70.00	□ \$78.75	\$78.75	\$87.50
Filing Fee	Filing Fee	Filing Fee	Filing Fee,
	& Certificate of Status	& Certified Copy	Certified Co
	co continuate of status	La common copy	& Certificat
			Status
		ADDITIONAL COPY REQUIR	

ЭМ	Thomas P Brennan
J141	Name (Printed or typed)
	2208 Aspen Way
	Address
	Boynton Beach,FL. 33436
	City, State & Zip
	561 876 8715
	Daytime Telephone number
	patbren711@gmail.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)

Principal street address 2208 Aspen Way		~	Mailing address, if different is: 2208 Aspen Way		
	ch,FL. 33436		Boynton Beach,FL. 33436		
eticke iii Pur purpose for which urricane shu	the corporation is organized is: To put uniters	p and take dow	n or open or o	close	
	f stock is: ² TIAL OFFICERS AND/OR DIRECTORS		SLUBERS OF STATE	3 MAY 14 PH 1:00	
number of shares of	f stock is: Z	Name and Title:Address:	SECRETATE OF STATE	Ha PH	
number of shares of the shares of the share and Tit Address	fstock is: ² TIAL OFFICERS AND/OR DIRECTORS e: Thomas P. Brennan,Pres 2208 Aspen Way	Name and Title: Address: Name and Title:	SECURIALISM OF STATE	FH 1: 00	

Name and	d Title:	Name and Title:					
Address		Address:					
ARTICLE VI	REGISTERED AGENT						
The name and Fi	orida street address (P.O. Box NOT acceptable) of	the registered agent is:					
Name:	Thomas P Brennan						
Address:	2208 Aspen Way						
	Boynton Deach, P1 33434						
ARTICLE VII	INCORPORATOR	7. S. 3.					
The <u>name and ad</u>	dress of the Incorporator is:						
Name:	Thomas P Brennan						
Address:	2208 Aspen Way						
	Boynton Beach,FL. 33436	I: 00 STATE ORIDA					
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							
	PR	4-24-13					
	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.							
Tho	Required Signature/Incorporator	<u> </u>					