

P1300065386

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

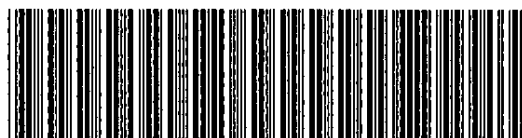
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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08/05/13--01002--015 **78.75

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
13 AUG -5 AM 11:49

Ps 8/5/13

COVER LETTER

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

SUBJECT: Brooke Images, 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: Ashley Brooke Granstad

Name (Printed or typed)

712 Camelia Street

Address

Atlantic Beach, FL 32233-2522

City, State & Zip

904-704-5721

Daytime Telephone number

ashley@brookeimages.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. (Pro

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ARTICLE I NAME

The name of the corporation shall be:

Brooke Images, Inc.

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ARTICLE II PRINCIPAL OFFICE

Principal street address

712 Camelia Street

Atlantic Beach, FL 32233-2522

Mailing address, if different is:

712 Camelia Street

Atlantic Bech, FL 32233-2522

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

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Ashley Brooke Granstad, Pres

Address

712 Camelia St

Atlantic Beach, FL

32233-2522

Name and Title: Dennis Gregory Granstad, II VP

Address:

712 Camelia St

Atlantic Beach, FL

32233-2522

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

(cont.)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

Name and Title: _____ Name and Title: 13 AUG -5 AM 11:49

Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Dennis Gregory Granstad II

Address: 712 Camelia St
Atlantic Beach, FL 32233

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Ashley Brooke Granstad

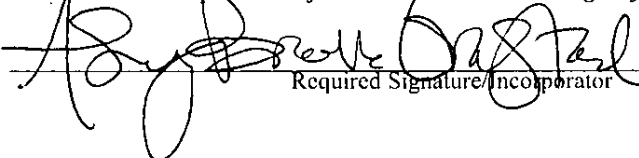
Address: 712 Camelia St
Atlantic Beach, FL 32233

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

7/30/13
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

7/30/13
Date