

P13000079285

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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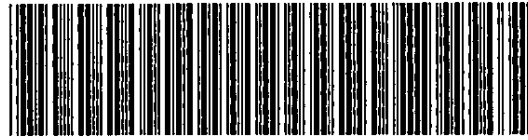
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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09/23/13--01009--013 **78.75

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13 SEP 23 PM 4:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K 09/25/13

COVER LETTER

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

SUBJECT: Brown Mechanical 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: David A Brown
Name (Printed or typed)

4845 Robin Drive
Address

Saint cloud, Fla 34772
City, State & Zip

407-709-1665
Daytime Telephone number

V Brown 4845 @ AOL.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)

ARTICLE I NAME

The name of the corporation shall be: Browns Mechanical Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

4845 Robin Drive
Saint Cloud Fla 34772

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Service and Installation of Heating, Air Conditioning, Refrigeration, and Ventilation equipment.

ARTICLE IV SHARES

The number of shares of stock is: 500

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TALLAHASSEE, FLORIDA

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Dave Brown/ President

Name and Title: Richard Birtchman II /Vice President

Address: 4845 Robin Drive
Saint cloud Fla
34772

Address: 9150 CONCORD Rd
St Cloud FL
34773

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

(conti.)

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: Dave Brown
Address: 4845 Robin Drive
Saint cloud, Fla, 34772

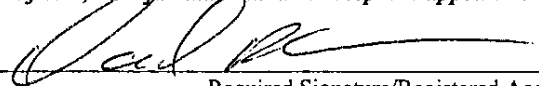
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Richard Birtchman II
Address: 9150 Concord Rd
St. Cloud, Fl 34773

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TALLAHASSEE, FLORIDA

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

9/4/2013
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

9/20/13
Date