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| (Requestor's Name) | | | | |
|---|----------------|-------------|--|--|
| (Address) | | | | |
| (Address) | | | | |
| (City/State/Zip/Phone #) | | | | |
| PICK-UP | ☐ WAIT | MAIL | | |
| (Business Entity Name) | | | | |
| (Document Number) | | | | |
| Certified Copies | _ Certificates | s of Status | | |
| Special Instructions to Filing Officer: | | | | |
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Office Use Only



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DIVISION OF CORPORATIONS

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COVER LETTER

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

| _{subject:} Nicholas Cooper Ba | | |
|--|-------------------------------------|--|
| (PROPOSED CORPORA | TE NAME – <u>MUST INCL</u> | UDE SUFFIX) |
| Enclosed are an original and one (1) copy of the art | icles of incorporation and | d a check for: |
| \$70.00 \$78.75 Filing Fee & Certificate of Status | \$78.75 Filing Fee & Certified Copy | \$87.50 Filing Fee, Certified Copy & Certificate of Status |
| | ADDITIONAL CO | PY REQUIRED |
| FROM: Chris Roney | | |
| | (Printed or typed) | • |
| 8202 Wiles Road, | Address | |
| Coral Springs, FL | 33067 State & Zip | |
| 310-275-9988 | | |
| • | elephone number | |
| crystal@raibusinesste | eam.com d for future annual report | notification) |

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

| he name of the corporation shall be: Nicholas Cooper Brancic II PRINCIPAL OFFICE Principal street address 3202 Wiles Road, Ste 146 Coral Springs, FL 33067 PRINCIPAL OFFICE Principal street address any lawfe | Mailing address, if different is: 5950 Jefferson Blvd, Ste 4 Los Angeles, CA 90016 |
|--|--|
| Principal office Principal street address 202 Wiles Road, Ste 146 Coral Springs, FL 33067 | Mailing address, if different is: 5950 Jefferson Blvd, Ste 4 Los Angeles, CA 90016 |
| Principal street address 3202 Wiles Road, Ste 146 Coral Springs, FL 33067 | 5950 Jefferson Blvd, Ste 4 Los Angeles, CA 90016 |
| Coral Springs, FL 33067 | Los Angeles, CA 90016 |
| | |
| RTICLE III PURPOSE the purpose for which the corporation is organized is: Any lawfe | ul husiness opportunity |
| A Section of the Control of the Cont | ar bacimeet opportunity. |
| | · · · · · · · · · · · · · · · · · · · |
| | |
| Age and the state of the state | |
| | |
| | Name and Title: |
| Address 1111 S Grand Street | Address: |
| Los Angeles, Ca 90015 | |
| | |
| Name and Title: | Name and Title: |
| | Address: |
| | |
| Address | |
| | - Tradicis. |
| Address | |
| Address Name and Title: | Name and Title: |
| Address | Name and Title: |

SECRETARY OF STATE DIVISION OF CORPORATIONS

| Name an | d Title: | Name applitue: 1; 9 |
|--|--|---|
| Address | 10 01 | Address: |
| <i>ARTICLE VI</i> The <u>name</u> and F | REGISTERED AGENT Iorida street address (P.O. Box NOT acceptable) of | f the registered agent is: |
| Name: | Chris Roney | |
| Address: | 8202 Wiles Road, Ste 146 | - |
| 710070001 | Los Angeles, CA 33067 | - - |
| ARTICLE VII | INCORPORATOR | |
| The name and ac | ddress of the Incorporator is: | |
| Name: | Chris Roney | _ |
| Addicess. | 8202 Wiles Road, Ste 146 | ; |
| | Los Angeles, CA 33067 | - - |
| | ned as registered agent to accept service of process am familiar with and accept the appointment as reg | s for the above stated corporation at the place designated in gistered agent and agree to act in this capacity |
| (,,,, | for the | 9/20/2013 |
| - Crift | Required Signature/Registered Agent | Date |
| I submit this doc document to the | cument and affirm that the facts stated herein are Department of State constitutes a third degree felon | true. I am aware that the false information submitted in any as provided for in s.817.155, F.S. |
| (ms | tay S | 9/20/2013 |
| | Required Signature/Incorporator | Date |
| | | |