

P13000090735

(Requestor's Name)

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(City/State/Zip/Phone #)

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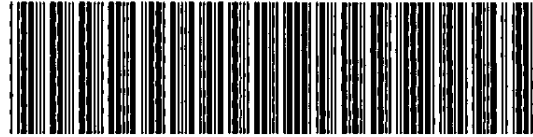
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11/06/13

COVER LETTER

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

SUBJECT: Boomerswork Employment Services, 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: Y. Drake Buckman, II

Name (Printed or typed)

2023 Constitution Boulevard

Address

Sarasota, FL 34231

City, State & Zip

941-923-7700

Daytime Telephone number

attorney@buckmanandbuckman.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: Boomerswork Employment Services, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

47 South Palm Avenue

Suite 205

Sarasota, FL 34238

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To conduct any legal business.

ARTICLE IV SHARES

The number of shares of stock is: 100

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TALLAHASSEE, FLORIDA

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Timothy Hearon, President

Name and Title: Michael Gross, Vice-President

Address 47 South Palm Avenue

Address: 1820 Hollis Street

Suite 205

Halifax, Nova Scotia

Sarasota, FL 34238

B3J 1W4

Name and Title: Richard Emberley, Treasurer and Secretary

Name and Title: _____

Address 1820 Hollis Street

Address: _____

Halifax, Nova Scotia

B3J 1W4

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: Y. Drake Buckman, II, Esq.
Address: 2023 Constitution Boulevard
Sarasota, FL 34231

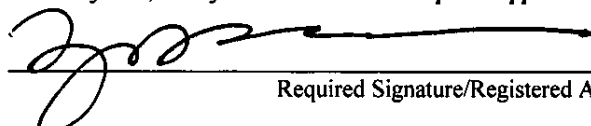
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ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:


Name: Timothy Hearon
Address: 47 South Palm Avenue Suite 205
Sarasota, FL 34238

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

11/1/13
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.

x 
Required Signature/Incorporator

10/5/13
Date