## P13000 100026

| (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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SECRE TARY OF STATE
STORES OF GORPORATE

2113 DEC. 1.6 AM 9: 5

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## **COVER LETTER**

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

| <sub>SUBJECT:</sub> Bria | n Davis Plumbir                              |  |  |
|--------------------------|--|--|--|
|                          | (PROPOSED CORPORA                            | ATE NAME – <u>MUST INCL</u>                        | UDE SUFFIX)  |
| Enclosed are an orig     | inal and one (1) copy of the ar              | ticles of incorporation and                        | l a check for:   |
| \$70.00 Filing Fee       | □ \$78.75 Filing Fee & Certificate of Status | \$78.75 Filing Fee & Certified Copy  ADDITIONAL CO | \$87.50 Filing Fee, Certified Copy & Certificate of Status PY REOUIRED |
| FROM: TI                 | racie Davis                                  |  |  |
|                          | Nam  | e (Printed or typed)                               |  |

PO Box 99

Address

Vero Beach FI 32948

City, State & Zip

772-571-8200

Daytime Telephone number

office@briandavisseptic.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)

| 37 1 17 1 1 1 1 1 | ILEU<br>RY OF STATE<br>CORPORATION |
|-------------------|------------------------------------|
| TOTOR OF          | CURPORATION                        |

The name of the corporation shall be: Brian Davis Plumbing, Inc. 2013 DEC 16 AM 9: 50 ARTICLE II PRINCIPAL OFFICE Principal street address Mailing address, if different is: PO Box 99 7200 84th Ave Felismere FL 32948 Vero Beach FL 32967 The purpose for which the corporation is organized is:

To do new construction plumbing, remodels and repairs ARTICLE IV SHARES
The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS Name and Title: Tracie Davis Pres Name and Title: PO Box 99 Address \_\_\_\_ Address: Fellsmere FL 32948 Name and Title: Address: Address

Name and Title: Name and Title:

Address:

Address

| ,                      |  |                          | SECRETARY OF STATE<br>DIVISION OF CORFORATION |
|------------------------|--|--------------------------|---|
| Name an                | d Title:   | Name and Title: Address: | 2013 DEC 16 AM 9: 50                          |
|                        | <del> </del>   |                          |   |
|                        |  |                          | <u> </u>                                      |
| ARTICLE VI             | REGISTERED AGENT   | 'the reciptored point in |   |
| Name:                  | orida street address (P.O. Box NOT acceptable) of Robert W Brombach  | the registered agent is: |   |
| Address:               | 12575 79th St  |                          |   |
|                        | Fellsmere FL 32948   |                          |   |
| ARTICLE VII            | INCORPORATOR   |                          |   |
| The <u>name and ac</u> | dress of the Incorporator is:  |                          |   |
| Name:                  | Tracie P Davis   |                          |   |
| Address:               | PO Box 99  |                          |   |
|                        | Fellsmere FL 32948   |                          |   |
|                        | ned as registered agent to accept service of process<br>am familiar with and accept the appointment as reg |                          |   |
|                        | Holed Bankoul Required Signature/Registered Agent Roj  | Seat W Rome has          | 12/12/13<br>Date                              |
|                        | ument and affirm that the facts stated herein are<br>Department of State Constitutes a third degree felon  | true. I am aware that    | the false information submitted in a          |
| 2                      | Hay Signature/Incorporator TRA   |                          | 12/12/13<br>Date                              |
|                        | 1 PH   | UICI PINO                |   |