

P14000002980

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

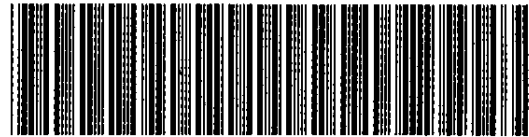
(Document Number)

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630  
W130000070105



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12/23/13--01047--018 \*\*87.50

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
13 DEC 23 PM 4:33

1/13/14

## COVER LETTER

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

SUBJECT: Brian Tribble, P.A.  
(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      ☐ \$78.75  
Filing Fee      Filing Fee  
                         & Certificate of Status

☐ \$78.75      ☒ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                         & Certificate of  
                         Status

**ADDITIONAL COPY REQUIRED**

FROM: Brian Tribble  
Name (Printed or typed)  
3655 Seaside Dr. Apt. 129  
Address  
Key West, FL 33040  
City, State & Zip  
(305) 393-7209  
Daytime Telephone number  
BrianTribble@gmail.com  
E-mail address: (to be used for future annual report notification)

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

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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 27, 2013

BRIAN TRIBLE  
3655 SEASIDE DRIVE  
APT. 129  
KEY WEST, FL 33040

SUBJECT: BRIAN TRIBLE, P.A.  
Ref. Number: W13000070105

RECEIVED  
14 JAN 10 AM 10:05  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

We have received your document for BRIAN TRIBLE, P.A. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The specific business purpose of the professional association must be stated in the document. *called + spoke with CSR. Amended application* ✓

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Claretha Golden  
Regulatory Specialist II  
New Filing Section

Letter Number: 113A00029177

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DIVISION OF CORPORATIONS  
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EFFECTIVE DATE 01/01/14

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

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**ARTICLE I NAME**

The name of the corporation shall be:

Brian Tribble, P.A.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

3655 Seaside Dr. Apt. 129  
Key West, FL 33040

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Brian Tribble, P.A. is formed  
for liability + tax purposes of the real estate agent  
Brian Tribble.

\*To provide real estate services.

**ARTICLE IV SHARES**

The number of shares of stock is:

100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title:

Brian Tribble, Manager

Name and Title:

Address

3655 Seaside Dr. Apt. 129  
Key West, FL 33040

Address:

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

(conti.)

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

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

Name: Brian Tribble

Address: 3655 Seaside Dr. Apt. 129  
Key West, FL 33040

**ARTICLE VII INCORPORATOR**

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

Name: Brian Tribble

Address: 3655 Seaside Dr. Apt 129  
Key West, FL 33040

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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

Brian Tribble  
Required Signature/Registered Agent

12/19/2013  
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.

Brian Tribble  
Required Signature/Incorporator

12/19/2013  
Date

Article VIII Effective Date is 1/1/2014  
Brian Tribble