

PH000026505

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

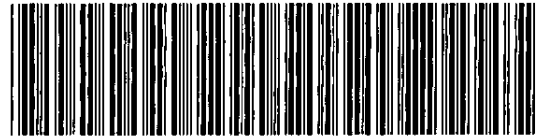
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900257857279

RECEIVED
DEPARTMENT OF
REVENUE
2014 MAR 25 AM 10:58
TALLAHASSEE, FLORIDA
SUFFICIENCY OF FILING

FILED
14 MAR 25 AM 7:27
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 068692 4320744

AUTHORIZATION :

COST LIMIT : \$ 70.00

ORDER DATE : March 24, 2014

ORDER TIME : 5:08 PM

ORDER NO. : 068692-005

CUSTOMER NO: 4320744

DOMESTIC FILING

NAME: BRUGES PROPERTIES, INC.

EFFECTIVE DATE:

XX ARTICLES OF INCORPORATION
 CERTIFICATE OF LIMITED PARTNERSHIP
 ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight - EXT. 52956

EXAMINER'S INITIALS: _____

FILED
14 MAR 25 AM 7:27
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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: Bruges Properties, Inc.

ARTICLE II PRINCIPAL OFFICE
Principal street address

505 Park Avenue 8th Floor

New York; NY

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any and all lawful business

ARTICLE IV SHARES
The number of shares of stock is: 1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: M. Stephen Rasch, Director/Secretary

Address: 505 Park Avenue 8th Floor
New York, NY 10022

Name and Title: _____

Address: _____

Name and Title: Jeffrey E. Wacksman, Director/President

Address: 505 Park Avenue, 8th Floor
New York, NY 10022

Name and Title: _____

Address: _____

Name and Title: Leigh R. Bass, Director/Treasurer

Address: 505 Park Avenue 8th Floor
New York, NY 10022

Name and Title: _____

Address: _____

FILED
14 MAR 25 AM 7:27
SECRETARY OF STATE
TALLAHASSEE FLORIDA

(cont.)

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:

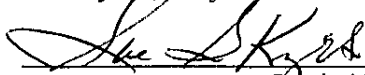
Name: Corporation Service Company
Address: 1201 Hays Street
Tallahassee, FL 32301

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Mr. Stephen Rasch
Address: 505 Park Avenue 8th Floor
New York, NY 10022

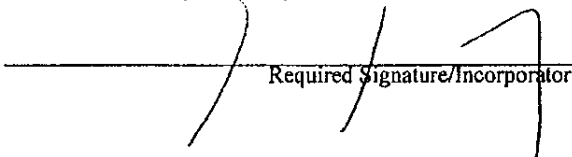
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Sue G. Knight
Required Signature/Registered Agent Assistant Vice President

3/24/14
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

3/24/14
Date

FILED
14 MAR 25 AM 7:27
SECRETARY OF STATE
TALLAHASSEE FLORIDA