

P/4000028096

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

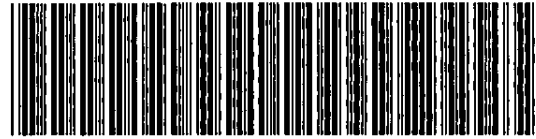
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
14 MAR 27 PM 4:46

## COVER LETTER

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

SUBJECT: BD MOSS CONSTRUCTION COMPANY 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: BRIAN D. MOSS  
Name (Printed or typed)

5445 LAKE HAVEN BLVD  
Address

SEBRING FL 33875  
City, State & Zip

(906) 280-6990  
Daytime Telephone number

\_\_\_\_\_  
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: BD MOSS CONSTRUCTION CO, INC.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

5445 LAKE HAVEN BLVD.  
SEBRING, FL 33875

9908 US HWY 2  
RAPID RIVER, MI 49878

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: TO PERFORM CONSTRUCTION

**ARTICLE IV SHARES**

The number of shares of stock is: 1000

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

Name and Title: BRIAN MOSS, PRES. Name and Title: \_\_\_\_\_

Address: 9908 US HWY 2 Address: \_\_\_\_\_  
RAPID RIVER, MI 49878

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

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

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

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

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DIVISION OF CORPORATIONS  
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(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: BRIAN MOSS

Address: 5445 LAKE HAVEN BLVD.  
SEBRING, FL 33875

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**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: BRIAN MOSS

Address: 5445 LAKE HAVEN BLVD.  
SEBRING, FL 33875

*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*

X Brian Moss Incorporator

Required Signature/Registered Agent

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

\_\_\_\_\_  
Date

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Address: 9908 US HWY 2 Address: \_\_\_\_\_

RAPID RIVER, MI 49878

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

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

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

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

(conti.)

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

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

Name: BRIAN MOSS  
Address: 5445 LAKE HAVEN BLVD.  
SEBRING, FL 33875

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FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

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X Brian Moss / Incorporator  
Required Signature/Registered Agent

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.

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Required Signature/Incorporator

\_\_\_\_\_  
Date