

PIS0000 23373

(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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WISUW 12620



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F. SCOTT



FLORIDA DEPARTMENT OF STATE
Division of Corporations

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

February 20, 2015

CARLOS BRYUN
9195 FONTAINEBLEAU BLVD. # 5
MIAMI, FL 33172

SUBJECT: CB MASTER CORP.
Ref. Number: W15000012620

We have received your document for CB MASTER CORP. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

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.

Tyrone Scott
Regulatory Specialist II
New Filings Section

Letter Number: 015A00003637

COVER LETTER

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

SUBJECT: **CB MASTER CORP.**

(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: Carlos Bruyn
Name (Printed or typed)

9195 fontainebleau Blvd. # 5

Address

Miami, FL 33172

City, State & Zip

305-559-1865

Daytime Telephone number

cjbruyn@comcast.net

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: CB Master Corp.

ARTICLE II PRINCIPAL OFFICE

Principal street address

9195 Fontainebleau Blvd #5
Miami, Fl 33172

Mailing address, if different is:

9195 Fontainebleau Blvd #5
Miami, Fl 33172

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Import, and Export, Purchases, Sales, and Distribution

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Carlos Bruyn - Pr. Tr.
Address: 9195 Fontainebleau Blvd
#5
Miami, Fl 33172

Name and Title: _____
Address: _____

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

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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:

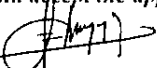
Name: Carlos Bruyn
Address: 9195 Fontainebleau Blvd. #5
Miami, FI 33172

ARTICLE VII INCORPORATOR

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

Name: Carlos Bruyn
Address: 9195 Fontainebleau Blvd. #5
Miami, FI 33172

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

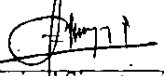


Required Signature/Registered Agent

01-29-2015

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

01-29-2015

Date