

P15000048633

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

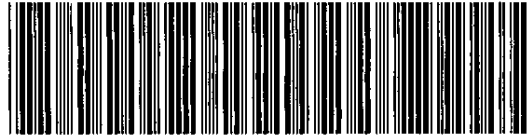
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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15 JUN -1 PM 4:58
TALLAHASSEE, FLORIDA
CLERK OF SUPERIOR COURT

6 JUN 3 2015

COVER LETTER

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

SUBJECT: BQS, 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: Jason P. Brooks

Name (Printed or typed)

3247 Brooklyn Avenue

Address

Port Charlotte, Florida 33952

City, State & Zip

941-628-4192

Daytime Telephone number

mabrooks33982@aol.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)

ARTICLE I NAME

The name of the corporation shall be: BQS Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

3247 Brooklyn Avenue

Port Charlotte, Florida 33952

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Construction. Stucco/Lathe/Drywall

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Jason P. Brooks, President

Name and Title: _____

Address 3247 Brooklyn Avenue

Address: _____

Port Charlotte, Florida 33952

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

15 JUN - 1 PM 1:50
CLERK OF SUPERIOR COURT
PORT CHARLOTTE, FLORIDA

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: Jason P. Brooks
Address: 3247 Brooklyn Avenue
Port Charlotte, Florida 33952

ARTICLE VII INCORPORATOR

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

Name: Jason P. Brooks
Address: 3247 Brooklyn Avenue
Port Charlotte, Florida 33952

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TALLAHASSEE, FLORIDA

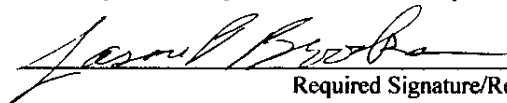
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

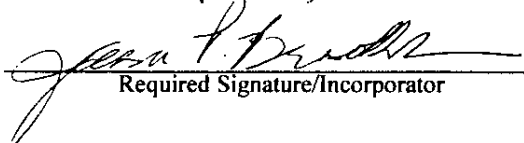
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

May 26, 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

May 26, 2015
Date