

P15000078170

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

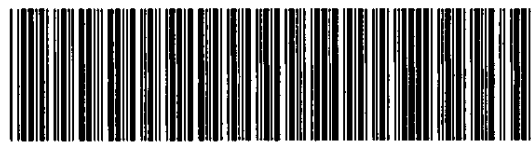
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100276829791

09/15/15--01020--001 **70.00

EFFECTIVE DATE
9-14-15

FILED
2015 SEP 15 PM 2:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

● SEP 23 2015

T. BROWN

COVER LETTER

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

SUBJECT: Barden Enterprises, 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 ☐ \$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: Rodney Barden

Name (Printed or typed)

8993 SE Angelfish Terrace

Address

Hobe Sound, FL 33455

City, State & Zip

804-307-8642

Daytime Telephone number

rodney.barden@gmail.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)

FILED
2015 SEP 15 PM 2:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be: Barden Enterprises, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address
8993 SE Angelfish Terrace
Hobe Sound, FL 33455

Mailing address, if different is: _____

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Automobile Consulting

EFFECTIVE DATE
9-14-15

ARTICLE IV SHARES

The number of shares of stock is: 1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Rodney Barden - President

Address 8993 SE Angelfish Terrace
Hobe Sound FL 33455

Name and Title: Rachel Barden - Treasurer

Address: 8993 SE Angelfish Terrace
Hobe Sound FL 33455

Name and Title: _____

Address _____

Name and Title: _____

Address: _____

Name and Title: _____

Address _____

Name and Title: _____

Address: _____

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: Rodney Barden _____

Address: 8993 SE Angelfish Terr _____

Hobe Sound, FL 33455 _____

ARTICLE VII INCORPORATOR

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

Name: Rodney Barden _____

Address: 8993 SE Angelfish Terrace _____

Hobe Sound, FL 33455 _____

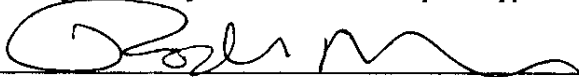
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 9-14-15 _____ (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

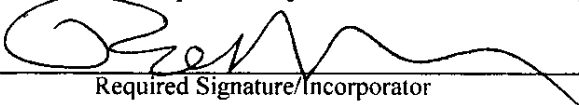


Required Signature/Registered Agent

9-14-15

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

9-14-15

Date