

PL50000094336

(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



200278965782

11/10/15--01018--003 **78.75

15 NOV 10 PM 4:23
CLERK OF SUPERIOR COURT
JANUARY 10 2016

MD 11/23

COVER LETTER

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

SUBJECT: BS OPERATIONS, 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: BREND A SOPER

Name (Printed or typed)

160 DOG TRACK ROAD

Address

LONGWOOD, FLORIDA 32750

City, State & Zip

407-948-4766

Daytime Telephone number

bsoper@finishingsystems.us

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: BS OPERATIONS, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

160 DOG TRACK ROAD

LONGWOOD FL 32750

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: OPERATE A BUSINESS IN THE STATE OF FLORIDA

ARTICLE IV SHARES

The number of shares of stock is: 500

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: BRENDA SOPER, PRESIDENT

Address 160 DOG TRACK ROAD

LONGWOOD FL 32750

Name and Title: CHRIS DREYER, VICE PRESIDENT

Address: 160 DOG TRACK ROAD

LONGWOOD FL 32750

Name and Title: ALLISON DREYER, SECRETARY

Address 160 DOG TRACK ROAD

LONGWOOD FL 32750

Name and Title: BRENDA SOPER, TREASURER

Address: 160 DOG TRACK ROAD

LONGWOOD FL 32750

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: BRENDA SOPER

Address: 160 DOG TRACK ROAD

LONGWOOD FL 32750

15 NOV 10 PM 4:23
ATTORNEY GENERAL'S OFFICE
TALLAHASSEE, FLORIDA

ARTICLE VII INCORPORATOR

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

Name: BRENDA SOPER

Address: 160 DOG TRACK ROAD

LONGWOOD FL 32750

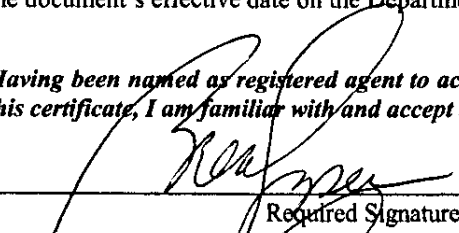
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: NOVEMBER 9, 2015 (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

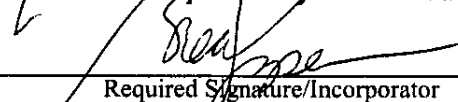


Required Signature/Registered Agent

NOVEMBER 9, 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

NOVEMBER 9, 2015

Date