

PISANO OLS

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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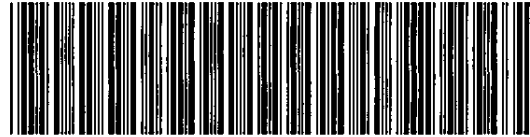
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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12/14/15--01007--015 **78.75

FILED
15 DEC 14 PM 9:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: M. Burt and Associates, 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: Henry Burt
Name (Printed or typed)
3991 Pepper Place
Address
Cocoa, FL 32926
City, State & Zip
321-208-8643
Daytime Telephone number
jbbssmn12lbs@yahoo.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: M. Burt and Associates, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

3991 Pepper Place

Cocoa, Fl 32926

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to provide a business for delivery of services of various types.

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Mark E Burt, President

Address: 1615 Cocoa Bay Blvd.

Cocoa, Fl 32926

Name and Title: Sean M. Burt, Director

Address: 2447 Mercury Drive

Cocoa, Fl 32926

Name and Title: Henry J. Burt, Treasurer

Address: 3991 Pepper Place

Cocoa, Fl 32926

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

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TALLAHASSEE, 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: Henry J. Burt
Address: 3991 Pepper Place
Cocoa, FL 32926

ARTICLE VII INCORPORATOR

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

Name: Henry J. Burt
Address: 3991 Pepper Place
Cocoa, FL 32926

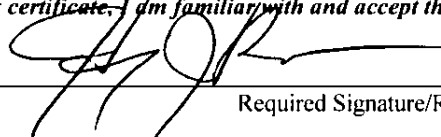
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 01/01/2016. (OPTIONAL)

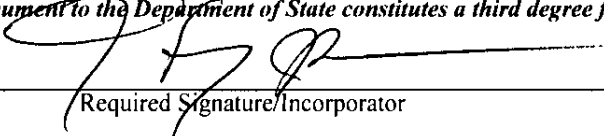
(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

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
12-11-15
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
12-11-15
Date