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ALLAHASSEE FLORIDA

03,419

COVER LETTER

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

SUBJECT: \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	PROPOSED CORPOR	TOO CATIC	ON SWELLING	INC.
Enclosed are an orig	inal and one (1) copy of the ar	ticles of incorporation and	lacheck 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: Bryant Elison
Name (Printed or typed)

3506 Phoenix Ave
Address

Tacksonville Fl. 32206
City, State & Zip

(904) 535-3596 - (904) 791-3113

Daytime Telephone number

bryantelison 40 annil. Com
E-mail address: (to be used for futhere annual report notification)

NOTE: Please provide the original and one copy of the articles.





FLORIDA DEPARTMENT OF STATE Division of Corporations

February 18, 2016

BRYANT ELLISON 2506 PHOENIX AVE JACKSONVILLE, FL 32206

SUBJECT: BRYANT ELLISON FABRICATION & WELDING INC.

Ref. Number: W16000012257

We have received your document for BRYANT ELLISON FABRICATION & WELDING INC. and your check(s) totaling \$90.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

A corporation may not act as its own incorporator. Please designate an individual, another active domestic or foreign corporation, with a street address.

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 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.

Tim Burch Regulatory Specialist II

Letter Number: 016A00003407

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

The name of the corporation shall be: Pryant Flis	on Fabrication	> 8 welding INC.	
ARTICLE II PRINCIPAL OFFICE Principal street address	As Mailing	address, if different is:	
Jocksonville El,	_	ruille Fl,	
32206	3770		
ARTICLE III PURPOSE The purpose for which the corporation is organized is:	e reason?	want to open	
a Fabrication & we	Iding Busi	iness. Is becar	Ų.
i Want to make things !			
and A.C. Coge's I also			a١
Beary would like to h	nely the pe	ople in the	
Someone Could mak	e Sate unc	come feel Safe	يرير ح
Some Continue	CFYICIC	VIII.C. V.C.	<u> </u>
The number of shares of stock is: 500)		
ARTICLE V INITIAL OFFICERS AND/OR DIRECTOR		16 TALL	
Name and Title: Valerie Willia			
Address 1118 Winthrop			
Sacksonville Fl 32206		OF ST	
3000			
Name and Title:	Name and Title:		
Address	Address:		
46-3 <u>48-48</u>			
Name and Title:	Name and Title:		
Address	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: Dryart Ellis	SEE SEE	
Address: 0506 Phoen	TA FOR	
Sacksonville	SO S	
ARTICLE VII INCORPORATOR	FS P III	
The name and address of the Incorporator is:	ORDE CONTROL OF THE C	
Name: Bryant Elliso	· · · · · · · · · · · · · · · · · · ·	
Address: 2506 Phoen	nix Aup	
Sax F1 322	4CF	
	,	
ARTICLE VIII EFFECTIVE DATE:	W16 (OPTIONAL)	
	fic 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 document's effective date on the Department of Sta	the applicable statutory filing requirements, this date will not be listed as ate's records.	
	vice of process for the above stated corporation at the place designated in intment as registered agent and agree to act in this capacity	in
Bruant Ellison Bur	nt 810:200 2-1-11	
Required Signature/Registere	red Agent Date	
I submit this document and affirm that the facts state document to the Department of State constitutes a third	ed herein are true. I am aware that the false information submitted in degree felony as provided for in s.817.155. F.S.	a
\mathcal{O} $+ \mathcal{C}/\mathcal{V}$	7,11	
Required Signature/Incorporator	Date	