

P16000046466

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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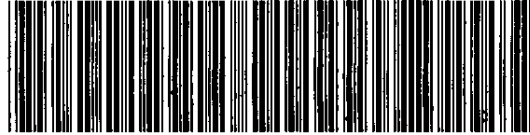
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800285309988

W16-36003

05/11/16--01016--001 **70.00

FILED
16 MAY 25 PM 1:16
STATE OF FLORIDA
TALLAHASSEE

DT-26-16

COVER LETTER

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

SUBJECT: Brandon Postal Contracts, 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: YOUNG & Associates
Name (Printed or typed)

8001 N. Dale Mabry HWY #401
Address

Tampa, FL 33614
City, State & Zip

813-352-7169
Daytime Telephone number

Lucyyoungpa@gmail.com
E-mail address: (to be used for future annual report notification)

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 18, 2016

YOUNG & ASSOCIATES
8001 N DALE MABRY HWY #401
TAMPA, FL 33614

SUBJECT: BRANDON POSTAL CONTRACTS, INC.
Ref. Number: W16000036003

X Group

Brandon Postal Contracts Group, Inc.

We have received your document for BRANDON POSTAL CONTRACTS, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

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: 016A00010524

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16 MAY 25 AM 10:38

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

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

Group

ARTICLE I NAME

The name of the corporation shall be: Brandon Postal Contracts X, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

704 Pearl Cir.
Brandon, FL 33510, US

Same

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any and All Lawful Business.

ARTICLE IV SHARES

The number of shares of stock is: 500 shares

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TAMPA FLORIDA

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Robert Brandon, Sr./P/s Name and Title:

Address: 704 Pearl Cir Address:

Brandon, FL 33510

Name and Title: Robert Brandon Jr. / S. Name and Title:

Address: 704 Pearl Cir Address:

Brandon, FL 33510

Name and Title: Keith Brandon / NP/s. Name and Title:

Address: 401 Harbor Place Dr. Address:

1428

Tampa, FL 33602

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: Robert Brandon Sr.
Address: 704 Pearl Cir
Brandon, FL 33510

ARTICLE VII INCORPORATOR

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

Name: Robert Brandon Sr.
Address: 704 Pearl Cir
Brandon, FL 33510

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16 MAY 25 PM 1:14
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

X Robert S. Branch _____ 5-6-16
Required Signature/Registered Agent 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.

X Robert S. Branch _____ 5-6-16
Required Signature/Incorporator Date