

PI9000094194

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

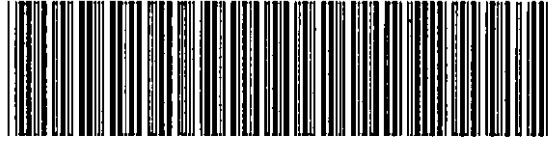
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TREASURER OF FLORIDA

19 DEC -2 PM 1:59

FILED

November 22, 2018

Division of Corporations  
Corporate Filings  
P.O. Box 6327  
Tallahassee, FL 32314

To Whom It May Concern:

I, Gilbert Rosenbrier, am the legal owner of Target Specific Marketing, Inc.,  
Document # P17000089383

I have no intentions of reinstating this corporation.

Thank you,



Gilbert Rosenbrier

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19 DEC -2 PM 1:59  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

## COVER LETTER

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

**SUBJECT:** Target Specific Marketing, 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:** Gilbert Rosenbrier  
Name (Printed or typed)

7000 E Cypresshead Drive  
Address

Parkland FL 33067  
City, State & Zip

954-461-3104  
Daytime Telephone number

gilrosenbrier@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)

**ARTICLE I NAME**

The name of the corporation shall be: Target Specific Marketing, Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

7000 E Cypresshead Drive

Parkland FL 33067

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: This coporation may engage or transact in any or all lawful  
activities or business permitted under the law of the United States, the State of FL, or any other state council,  
territory, or nation.

**ARTICLE IV SHARES**

The number of shares of stock is: 1000 \$1 par value per share

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Gilbert Rosenbrier President

Name and Title: \_\_\_\_\_

Address 7000 E. Cypresshead Drive

Address: \_\_\_\_\_

Parkland FL 33067

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Address: \_\_\_\_\_

FILED  
19 DEC -2 PM 2:00  
SECRETARY OF STATE  
TREASURER  
FLORIDA

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_

\_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Gilbert Rosenbrier

Address: 7000 E Cypresshead Drive

Parkland FL 33067

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Gilbert Rosenbrier

Address: 7000 E Cypresshead Drive

Parkland FL 33067

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NOV - 2 PM 2:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

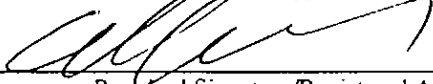
**ARTICLE VIII EFFECTIVE DATE:**

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 days prior or 90 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*

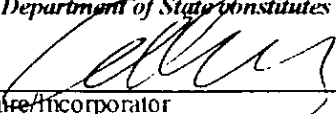


\_\_\_\_\_  
Required Signature/Registered Agent

11/23/19

\_\_\_\_\_  
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

11/23/19  
Date