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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : THE LAW OFFICES OF NICK SPRADLIN PLLC
Account Number : I20070000020

Phone : (813)435-3176

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

Email Address:

NS@NickSpradlin.Com

FLORIDA PROFIT/NON PROFIT CORPORATION

Brian Monday Inc

| | |
|-----------------------|---------|
| Certificate of Status | 0 |
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STATE
CORPORATION
DIVISION

ARTICLES OF INCORPORATION

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

ARTICLE I NAMEThe name of the corporation shall be: **Brian Monday Inc****ARTICLE II PRINCIPAL OFFICE**Principal ~~street~~ address

1336 prairie Lane

Apopka, FLORIDA 32703

Mailing address, if different is:

1336 prairie Lane

Apopka, FLORIDA 32703

ARTICLE III PURPOSEThe purpose for which the corporation is organized is: **ANY AND ALL LEGAL BUSINESS PURPOSE****ARTICLE IV SHARES**The number of shares of stock is: **1000 COMMON STOCK AT .10 CENTS PAR VALUE****ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: **Brian Monday D,P,S,T**Address **1336 prairie Lane****Apopka, FLORIDA 32703**

Name and Title:

Address:

Name and Title:

Address

Name and Title:

Address:

Name and Title:

Address

Name and Title:

Address:

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Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

ARTICLE VI REGISTERED AGENTThe name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:Name: Brian MondayAddress: 1336 Prairie LaneApopka FL 32703**ARTICLE VII INCORPORATOR**The name and address of the Incorporator is:Name: Brian MondayAddress: 1336 Prairie LaneApopka FL 32703

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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 its certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*

Brian Monday

Required Signature/Registered Agent

2-12-20

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Brian Monday

Required Signature/Incorporator

Date

2-12-20