

6/23/2020

P2000047722

Division of Corporations
Florida Department of State
Electronic Filing Cover Sheet

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To:

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

From:

Account Name : BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.
Account Number : 075350000353
Phone : (800)221-2972
Fax Number : (917)243-5843

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

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION

NextBridge Inc

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$70.00



June 24, 2020

FLORIDA DEPARTMENT OF STATE
Division of Corporations

BLUMBERG/EXCELSIOR

SUBJECT: NEXTBRIDGE INC
REF: W20000064523

We have received your document for NEXTBRIDGE INC . However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Due to transmission problems, your faxed document or coversheet is illegible or incomplete. Please refax the document and cover sheet to this office for processing.

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.

Carlos E Rico
Regulatory Specialist II

FAX Aud. #: E20000192275
Letter Number: 520A00012508

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

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

Mailing address, if different is:

3083 NW 30TH WAY3083 NW 30TH WAYBOCA RATON, FL 33431BOCA RATON, FL 33431**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

To engage in any lawful act or activity for which corporations may be organized.

ARTICLE IV SHARESThe number of shares of stock is: 200 with 1 par value**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: BRIAN REISS, Director

Name and Title: _____

Address 3083 NW 30TH WAY

Address: _____

BOCA RATON, FL 33431

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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 REISS

Address: 3083 NW 30TH WAY

BOCA RATON, FL 33431

ARTICLE VII INCORPORATORThe name and address of the Incorporator is:

Name: BRIAN REISS

Address: 3083 NW 30TH WAY


BOCA RATON, FL 33431

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*


 Required Signature/Registered Agent

6/22/2020
 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

6/22/2020
 Date