

P20000249413

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

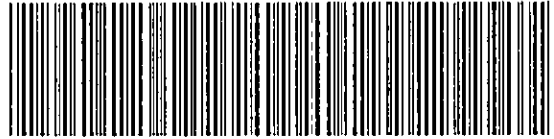
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

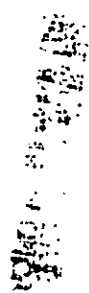
Special Instructions to Filing Officer:

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07/08/20--01009--022 **70.00



2020 JUL -8 PM 2:46

SECRETARY OF STATE
TALLAHASSEE, FL

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N. CULIGAN

JUL 9 2020

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite J • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Barron Capital Corp

Signature _____

Requested by: Seth

07/08/20

Name

Date

Time

Walk-In

Will Pick Up

Art of Inc. File _____

LTD Partnership File _____

Foreign Corp. File _____

L.C. File _____

Fictitious Name File _____

Trade/Service Mark _____

Merger File _____

Art. of Amend. File _____

RA Resignation _____

Dissolution / Withdrawal _____

Annual Report / Reinstatement _____

Cert. Copy _____

Photo Copy _____

Certificate of Good Standing _____

Certificate of Status _____

Certificate of Fictitious Name _____

Corp Record Search _____

Officer Search _____

Fictitious Search _____

Fictitious Owner Search _____

Vehicle Search _____

Driving Record _____

UCC 1 or 3 File _____

UCC 11 Search _____

UCC 11 Retrieval _____

Courier _____

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ARTICLES OF INCORPORATION

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

SECRETARY OF STATE
TALLAHASSEE, FL

ARTICLE I NAME

The name of the corporation shall be: Barron Capital Corp.

ARTICLE II PRINCIPAL OFFICE

Principal street address
48 East Flagler Street, PH-105

Miami, Florida 33131

Mailing address, if different is:
48 East Flagler Street, PH-105

Miami, Florida 33131

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to carry on any lawful business or activity.

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Nathan Barron, President

Address: 360 Wrangler Way
Seneca, South Carolina 29672

Name and Title: Daniel Fiske, Secretary

Address: 1436 Presidential Way
Miami, Florida 33179

Name and Title: Jacob Bamdas, Treasurer

Address: 3267 Saint Amnestying Drive
Boca Raton, Florida 33496

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

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: Evan R. Marbin & Associates, P.A.
Address: 48 East Flagler Street, PH-104
Miami, Florida 33131

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Evan R. Marbin
Address: 48 East Flagler Street, PH-104
Miami, Florida 33131

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TALLAHASSEE, FL

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.)

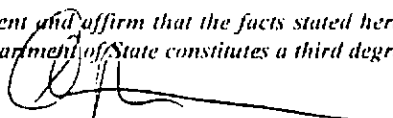
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

7/10/20
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

7/10/20
Date