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PICK-UP	WAIT MAIL		
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Certified Copies	Certificates of Status		
Special Instructions to	Filing Officer:		
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COVER LETTER

Department of State New Filing Section Division of Corporations P. O. Box 6327

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Tallahassee, FL 32314

SUBJECT: BC REM	MINGTON GREEN, INC		_
	(PRÓPOSED CORPORA	TE NAME – <u>MUST INCL</u> I	HDE SUFF <u>IX</u>)
Enclosed are an origi	nal and one (1) copy of the arti	icles of incorporation and	l a check for:
□ \$70.00 Filing Fee	\$\\$\\$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy	& Certificate of Status
		ADDITIONAL CO	PPY REQUIRED =
FROM: <u>CH</u>	RIS KARPINSKI Name	e (Printed or typed)	
<u>291</u>	0 KERRY FOREST PKWY		
<u>TAl</u>	LAHASSEE, FL 32309	Address State & Zip	
	·	value to 254p	
850	-251-9891	elephone number	
	Daytine	ciepnone number	
<u>chris</u>	s@karpinskilaw.net	1 6 - 6	
	E-mail address: (to be used	a for future annual report r	iounicadon)

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 corporat	ion shall be: BC REMINGTON G	REEN, INC	
ARTICLE II PRINC	<u>TPAL OFFICE</u> Principal <u>street</u> address	2910 KERR	Mailing address, if different is: PY FOREST PKWY, D4-112 SEE, FL 32309
ARTICLE III PURPO The purpose for which the	DSE he corporation is organized is:		
FOR ANY AND A	LL LAWFUL BUSINESS WIT	HIN THE FLORI	DA STATUES, INCLUDING
COMMERCIAL RE	EAL ESTATE MANAGEMEN	T BUT NOT LIMI	TED TO SUCH.
			7. S. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2.
			SECRE A
ARTICLE IV SHARI	ES		MHH: 06 F SIATE FLORIDA
The number of shares of	stock is: 100		
ARTICLE V INITIA	<u>L OFFICERS AND/OR DIRECTORS</u>	·	≫.' On
	Bertin J Karpinski, Jr., Presi	-	. Christopher Karpinski, VP
	700 0 1 1 01 : 0:		2910 Kerry Forest Pkwy
Address	Oviedo, FL 32765	Address:	Tallahassee, FL 32309
	Oviedo, PL 32765		Taliallassee, FL 32309
Name and Title:		Name and Title	<u>; </u>
Address			
, tall ess.			
			
Name and Title:		Name and Title	:
Address			
TOOTES			
			

Name a	nd Title:	Name and Title:
Addres	s	Address:
	REGISTERED AGENT Torida street address (P.O. Box NOT acceptable)	of the registered agent is:
Name:	Christopher Karpinski	
Address:	2807 REMINGTON GREEN CIR	
	Tallahassee, FL 32309	<u> </u>
<u>ARTICLE VII</u>	<u>INCORPORATOR</u>	
The <u>name and a</u>	ddress of the Incorporator is:	
Name:	Shannon Rosier	_
Address:	PO Box 16375	
	Tallahassee, FL 32317	<u> </u>
ARTICLE VIII	EFFECTIVE DATE: Tother than the date of filing: 07/17/2020	(OPTIONAL)
		anot be more than five days prior or 90 days after the
	e inserted in this block does not meet the applicable effective date on the Department of State's record	ble statutory filing requirements, this date will not be listed ds.
	ned as registered agent to accept service of proces, familiar with and accept the appointment as regis	ss for the above stated corporation at the place designated in stered agent and agree to act in this capacity 7/17/20
	Required Signature/Registered Agent	Dale
document to the	Department of State constitutes a third degree fel	are true. I am aware that the false information submitted lony as provided for in s.817.155, F.S.
Than	nn Rosa.	1/17/2000
Required Signat	ure/Incorporator	Date