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Division of Corporations

P21000392702

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

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

From:

Account Name : SOSME ACCOUNTING & TAX SERVICES LLC
Account Number : I20200000102
Phone : (954)998-1035
Fax Number : (954)573-1488

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

Email Address: _____

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COMMERCIAL

**FLORIDA PROFIT/NON PROFIT CORPORATION
BREAD RUNNAZ APPAREAL INC**

Certificate of Status	1
Certified Copy	0
Page Count	01
Estimated Charge	\$78.75

2021 OCT 22 PM 5:20

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October 22, 2021

FLORIDA DEPARTMENT OF STATE

Division of Corporations

SOSME ACCOUNTING & TAX SERVICES LLC

SUBJECT: BREAD RUNNAZ APPAREAL INC
REF: W21000139990

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document submitted does not meet legibility requirements for electronic filing. Please do not attempt to refax this document until the quality has been improved.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

If you have any further questions concerning your document, please call (850) 245-6052.

Tyrone Scott
Regulatory Specialist II
New Filings Section

FAX Aud. #: H21000392702
Letter Number: 221A00025773

COVER LETTER

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

SUBJECT: BREAD RUNNAZ APPAREAL 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:** STEVEN SANTIAGO

Name (Printed or typed)

2821 SW 73RD WAY UNIT 1814

Address

DAVIE FL 33314

City, State & Zip

(321) 431-3538

Daytime Telephone number

BREADRUNNAZ_50@ICLOUD.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 NAMEThe name of the corporation shall be: BREAD RUNNAZ APPAREAL INC**ARTICLE II PRINCIPAL OFFICE**Principal street address2821 SW 73RD WAY UNIT 1814DAVIE FL 33314

Mailing address, if different is:

ARTICLE III PURPOSEThe purpose for which the corporation is organized is: ANY AND ALL LAWFULL BUSINESS**ARTICLE IV SHARES**The number of shares of stock is: 100**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: STEVEN SANTIAGO (PRESIDENT) Name and Title:Address 2821 SW 73RD WAY UNIT 1814 Address:DAVIE FL 33314

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: STEVEN SANTIAGO
Address: 2821 SW 73RD WAY UNIT 1814
DAVIE FL 33314

ARTICLE VII INCORPORATORThe **name and address** of the Incorporator is:

Name: STEVEN SANTIAGO
Address: 2821 SW 73RD WAY UNIT 1814
DAVIE FL 33314

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

10/20/21

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

10/20/21

Date