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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 : CAPITOL SERVICES, INC.
Account Number : I2016000017
Phone : (855)498-5500
Fax Number : (800)432-3622

S. CHATHAM
SEP 10 2022

****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
BD-33 INC.**

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

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COVER LETTER

H22000311488

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

SUBJECT: BD-33 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:** MARIA HERNANDEZ/LONGO LAW GROUP LLP

Name (Printed or typed)

100 WILSHIRE BOULEVARD, SUITE 2000

Address

SANTA MONICA, CA 90401

City, State & Zip

626.297.7013 CELL OR 310.270.9044 OFFICE

Daytime Telephone number

MHERNANDEZ@LONGOLAWGROUP.COM

E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

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ARTICLES OF INCORPORATION

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

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ARTICLE I NAME

BD-33 INC.

The name of the corporation shall be: _____

ARTICLE II PRINCIPAL OFFICEPrincipal street address

Mailing address, if different is: _____

224 BRACKENWOOD TERRACE
PALM BEACH GARDENS, FL 33418**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: HOLDING COMPANY**ARTICLE IV SHARES**The number of shares of stock is: 1,000**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: Brendan Donovan, CEOName and Title: Brendan Donovan, SecretaryAddress 224 Brackenwood Terrace
Palm Beach Gardens, FL 33418Address: 224 Brackenwood Terrace
Palm Beach Gardens, FL 33418Name and Title: Aly Kitchens, CFOName and Title: Brendan Donovan, DirectorAddress 224 Brackenwood Terrace
Palm Beach Gardens, FL 33418Address: 224 Brackenwood Terrace
Palm Beach Gardens, FL 33418

Name and Title: _____

Name and Title: _____

Address _____

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: ALY KITCHENS

Address: 224 Brackenwood Terrace
Palm Beach Gardens, FL 33418

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

Name: BRENDAN DONOVAN

Address: 224 Brackenwood Terrace
Palm Beach Gardens, FL 33418

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

<u>Aly kitchens</u>	<u>9/8/2022</u>
Required Signature/Registered Agent	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.

<u>[Signature]</u>	<u>9/8/2022</u>
Required Signature/Incorporator	Date

H22000311488

Leslie Sellers

From: faxfinder@capitol-services.com
Sent: Friday, September 09, 2022 10:23 AM
To: Leslie Sellers
Subject: FaxFinder Fax Notification: Failed to send fax to 850-617-6381
Attachments: fax_outbound_850-617-6381_20220909_092230_0000620F-0000.pdf

Follow Up Flag: Follow up
Flag Status: Flagged

Create Time: 09/09/2022 08:34:08 AM
 Schedule Time: 09/09/2022 09:22:30 AM
 State: failed
 Schedule Message: Unknown code encountered Hangup code: 0 Try #: 5
 Username: admin
 Sender name: Leslie Sellers
 Sender email: lsellers@capitol-services.com Sender phone: 855-498-5500 Sender fax: 800-432-3622 Sender org:
 Capitol Services, Inc.
 Subject: H22000311488
 Max tries: 5
 Try interval: 600
 Priority: 3
 Pages: 5
 Recipient fax: 850-617-6381
 Recipient phone:
 Recipient name:
 Recipient org: FL SOS
 Use cover page: true
 Receipt: always
 Print receipt: never
 Print receipt printer:
 Print receipt first page: false
 Fax Page Size: auto

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