

P22000075756

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

(Business Entity Name)

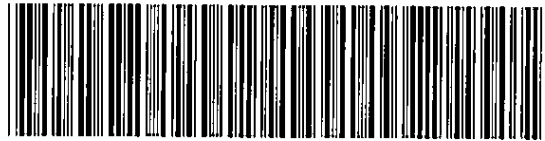
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S. CHATHAM

OCT 3 - 2022

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
22 OCT -3 PM 3:25

RECEIVED
2022 OCT -3 PM 3:24

COVER LETTER

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

SUBJECT: Kimberly Bruna, CPA, P.A.
(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 R. Berger
Name (Printed or typed)
c/o Vedder Price, P.C., 1633 Broadway, 31st Floor
Address
New York, NY 10019
City, State & Zip
212-407-7714
Daytime Telephone number
sberger@vedderprice.com
E-mail address: (to be used for future annual report notification)

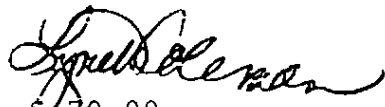
NOTE: Please provide the original and one copy of the articles.

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 899774 4348220

AUTHORIZATION :



COST LIMIT : \$ 70,000

ORDER DATE : August 22, 2022

ORDER TIME : 12:50 PM

ORDER NO. : 899774-225

CUSTOMER NO: 4348220

DOMESTIC FILING

NAME: KIMBERLY BRUNA, CPA, P.A.

EFFECTIVE DATE:

☒ ARTICLES OF INCORPORATION
☐ CERTIFICATE OF LIMITED PARTNERSHIP
☐ ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

☐ CERTIFIED COPY
☒ PLAIN STAMPED COPY
☐ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Eyliena Baker - EXT.

EXAMINER'S INITIALS: _____

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be: Kimberly Bruna, CPA, P.A.

ARTICLE II PRINCIPAL OFFICE

Principal street address
c/o Marcum S Corp Legal, 10 Melville Park Road
Melville, NY 11747

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Public Accountancy

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ARTICLE IV SHARES

The number of shares of stock is: 1,000 common shares, \$0.01 par value

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Kimberly Bruna, President

Name and Title: _____

Address 4922 SW 164th Avenue
Miramar, FL 33027

Address: _____

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 AGENT

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

Name: Kimberly Bruna
Address: 4922 SW 164th Avenue
Miramar, FL 33027

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Kimberly Bruna
Address: 4922 SW 164th Avenue
Miramar, FL 33027

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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

DocuSigned by
Kimberly Bruna
Required Signature/Registered Agent
Aug 29, 2022
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.

DocuSigned by
Kimberly Bruna
Required Signature/Incorporator
Aug 29, 2022
Date