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Division of Corporations

EMPIRE CORP

305 541 3770 P.02/05

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Florida Department of State  
Division of Corporations  
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Fax Number : (850) 922-4001

From: Account Name : EMPIRE CORPORATE KIT COMPANY  
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FLORIDA PROFIT CORPORATION OR P.A.

ACL, INC.  
Brian M, INC

Certificate of Status	0
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FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State

September 20, 1999

EMPIRE

SUBJECT: ~~ACL, INC.~~  
REF: W99000021610

Brianm, INC

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 name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with a notarized affidavit stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

Simply adding "of Florida" or "Florida" to the end of a name is not acceptable.

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Neysa Culligan  
Document Specialist

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ARTICLES OF INCORPORATION  
OF  
BRIANM, INC.

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TALLAHASSEE, FLORIDA

These Articles are in compliance with Chapter 607, F.S.

Article I

The name of this corporation shall be:

BRIANM, INC.

Article II

This corporation shall commence existence upon the date of filing with the Division of Corporations, state of Florida, and shall have perpetual existence.

Article III

The principal place of business and mailing address of this corporation shall be: 901 N. ANDREW AVENUE  
FORT LAUDERDALE, FL 33311

Article IV

The general nature of business of this corporation is to transact any and all lawful business.

Article V

The number of shares which this corporation shall have authority to issue is 1,000 shares, having an individual par value of \$1.00

Unless otherwise stated in these articles, or in an amendment to these articles, there shall be only one (1) class of stock of this corporation.

Article VI

The name and street address of the initial Registered Agent of this corporation shall be: SHELDON J. BURNETT, ESQ.  
367 ALHAMBRA CIRCLE  
CORAL GABLES, FL 33134

PREPARED BY: RAY STORMONT, EMPIRE CORPORATE KIT COMPANY,  
1492 WEST FLAGLER STREET, #200, MIAMI, FL 33135, (305) 541-3694

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Article VII

The initial board of Directors shall consist of a total of 2 person(s) and the name and address of the person(s) who are to serve as an initial director(s)

MATTHEW LUNDE  
DIREC./PRES.

901 N. ANDREW AVENUE  
FORT LAUDERDALE, FL 33311

SABRINA LUNDE  
SEC./TREAS.

901 N. ANDREW AVENUE  
FORT LAUDERDALE, FL 33311

Article VIII

The name and address of the incorporator executing these Articles of Incorporation is:

EMPIRE CORPORATE KIT OF AMERICA, INC.  
1492 WEST FLAGLER STREET #200  
MIAMI, FL 33135

The undersigned has executed these Articles of Incorporation this 20th day of SEPTEMBER, 1999.

Ray Stormont  
Incorporator  
Ray Stormont, President  
Signing for  
Empire Corporate Kit of America, Inc.

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EMPIRE CORP

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**CERTIFICATE OF DESIGNATION  
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of section 807.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida.

First that Brianm, Inc.

desiring to organize under the laws of the State of Florida

with its principal office, as indicated in the articles of incorporation has

named Sheldon T. Burnett, Esq.

located at 367 Alhambra Circle

City of Coral Gables County of Dade State of Florida,

as its agent to accept service of process within this state.

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

SIGNATURE

Registered Agent

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TALLAHASSEE, FLORIDA

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