

P14000069869

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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(((H14000196432 3)))



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To: Division of Corporations
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

14 AUG 20 PM 12:30

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AND
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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
SLICK PARTS INC.

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

79496

14 AUG 20 PM 1:40

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TALLAHASSEE, FLORIDA

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Corporate Filing Menu

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H14000190432

COVER LETTER

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

SUBJECT: Slick Parts 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
Filing Fee

\$78.75
Filing Fee
& Certificate of Status

\$78.75
Filing Fee
& Certified Copy

\$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: Neil Sattler
Name (Printed or typed)

9861 s.w. 4th st.
Address

Plantation FL 33324
City, State & Zip

954-553-9200
Daytime Telephone number

cneilsat@aol.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)

14 AUG 20 PM 12:31

ARTICLE I NAME
The name of the corporation shall be: Slick Parts Inc.

ARTICLE II PRINCIPAL OFFICE
Principal street address

9861 s.w. 4th st.
Plantation FL 33324

SECRETARY OF STATE
TALLahassee, FL 32811
Mailing address, if different is:

ARTICLE III PURPOSE
The purpose for which the corporation is organized is: Wholesale

ARTICLE IV SHARES 500
The number of shares of stock is:

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Chris Glardon (president) Name and Title: _____
Address: 3904 w. Gardenia Ave Address: _____
Weston Fl 33332

Name and Title: Neil Sattler (vp) Name and Title: _____
Address: 9861 s.w. 4th st. Address: _____
Plantation, Fl 33324

Name and Title: Mike Topputo (vp) Name and Title: _____
Address: 16 Mattens Ct. Address: _____
Glendale Oh 45246

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AND
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Name and Title: _____	Name and Title: _____
Address _____	Address: _____
_____	_____
_____	_____

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VI REGISTERED AGENT

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

Name: C N Sattler

Address: 9861 s.w. 4th st
Plantation Fl 33324

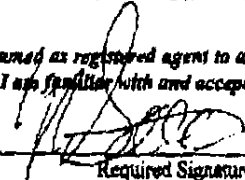
ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

Name: Neil Sattler

Address: 9861 s.w. 4th St.
Plantation, Fl 33324

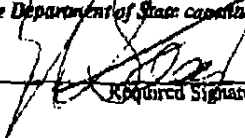
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Required Signature/Registered Agent

8/15/2014
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.817.153, F.S.



Required Signature/Incorporator

8/15/2014
Date