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COVER LETTER

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

SUBJECT:	te Power Pr	Poting Solut	Pons, 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				

FROM: Daymiri Buergo Name (Printed or typed)
Name (Printed or typed)
15546 SW 23rd Lane
Address
Miami FL 33185
City, State & Zip
786 691-6484
Daytime Telephone number
elPtepps Inc @gmail. com. E-mail address: (to be used for future annual report notification)
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)

The name of the corporat	ion shall be: Elite Powe	er Prin	iting Solutions, Inc.
	NCIPAL OFFICE Principal street address		Mailing address, if different is:
15546 SW	ashn		
Miami F			
ARTICLE III PURI	POSE ne corporation is organized is:	notaid	Prensses and
C. P. P. P. h.	Pod b Poderd con	dma	Pling equerpment
Co 100 PC			
<u>repuir</u>	·		- The first
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			23 PG 23
	18 1/ Marie 18 1		3
			REPORATION 2: 16
ARTICLE IV SHA	RES		OK.
The number of shares of			~
ADTICLE II INUT	TAL OFFICEDS AND/OF DIRECTOR	e	
	TAL OFFICERS AND/OR DIRECTOR		DAYMINI Buergo Director
Name and Title	ITTHISSUS NATILY - DITECTO	Name and Little	155116 Con 22 / D
Address	15546 SW23LN Miami FL 33185	Address:	13546 SW 23 AM
	MIAMI FL 33185		MIAMI FL 33185
1 70		3.77 3.77741	
Name and Title:			2:
Address		Address:	
Name and Title:		Name and Title	9:
Address		Address:	
			<u> </u>

Name and Title:	·····	Name and Title:	· · · · · · · · · · · · · · · · · · ·
Address		Address:	
	RED AGENT		
•	address (P.O. Box NOT acceptable) of	the registered agent is:	
Name: DAY	miri Buergo		
Address: 1554	65W 23 Lane		
	mi FL 33185		
ARTICLE VII INCORPO	RATOR		
The name and address of the I	ncorporator is:		
Name: MA	erus Kahlig 546 SW23 Lane jami FL 33185		
Address: 155	146 SW23 Lane		
MI	ami FL 33/85		
Having been named as registe this certificate. I am familiar w	red agent to accept service of process with and accept the appointment as regi	for the above stated corporation istered agent and agree to act in	at the place designated in this capacity
<u> </u>	uired Signature/Registered Agent		9-20-13
Req	uired Signature/Registered Agent		Date
I submit this document and a	ffirm that the facts stated herein are t f State constitutes a third degree felony	rue. I am aware that the false i	
12	equired Signature/Incorporator		9-20-13
Re	equired Signature/Incorporator		Date