

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

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SUBJECT: High Pressure Solutions, 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 ADDITIONAL CO	☑ \$87.50 Filing Fee, Certified Copy & Certificate of Status OPY REQUIRED	
			4.5	
FROM:	Serena L. Gomez	e (Printed or typed)		: 274
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	8887-A Thumbwood Circle		LAF	02 JUL
	Address			
			SFR	·
	Boynton Beach, FL 33436			MH 10: 35
	City, State & Zip		ယ္အ	
			Dr.	01
	(561) 752–8379			
	Daytime	e Telephone number		

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)

<u>ARTICLE</u> I NAME

The name of the corporation shall be:

High Pressure Solutions, Incorporated

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

8887-A Thumbwood Circle Boynton Beach, FL 33436

ARTICLE III **PURPOSE**

The purpose for which the corporation is organized is:

To conduct prefessional business bound by the laws of Florida

ARTICLE IV SHARES

The number of shares of stock is:

750,000.

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

REGISTERED AGENT

The name and Florida street address of the registered agent is:

Serena L. Gomez 8887-A Thumbwood Circle Boynton Beach, FL 33436

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Serena L. Gomez 8887-A Thumbwood Circle Boynton Beach, FL 33436

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

Signature/Registered Agent

Signature/Incorporator