# b0300007888AA

(Re	questor's Name)	1				
(Address)						
(Ad	dress)					
`	,					
	y/State/Zip/Phon	- <del> </del>				
(Cit	y/State/Zip/Prion	e #}				
PICK-UP	☐ WAIT	MAIL				
		=				
(Bu	siness Entity Na	me)				
(		···- <b>-</b> ,				
(Do	cument Number	}				
Certified Copies	s of Status					
Special Instructions to	Filing Officer:					

Office Use Only



900013538629

##78.75 \*\*\*78.75

03 MAR 10 PM 1:21
SECRETARY OF STATE
ALLAHASSEE, FLORIGA

1 SMITH MAR 1 2 2003

#### TRANSMITTAL LETTER

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

SUBJECT:

PEVA, INC

(Proposed Corporate Name-Must Include Suffix)

Enclosed is an original and (1) copy of the articles of incorporation and check for:

\_\_\$70.00

**x** \$78.75

\_\_\$78.75

\$87.50

Filing Fee

Filing Fee

Filing Fee

Filing Fee, Certified Con

& Certificate of Status

& Certified Copy

Certified Copy & Certificate of

Status

ADDITIONAL COPY REQUIRED

FROM:

PEDRO LIRA

533 PENTA COURT WESTON, FL. 33327

954-385-9290

NOTE: Please provide the original and on copy of the articles

#### 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: PEVA, INC

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 533 PENTA COURT WESTON, FL. 33327

#### ARTICLE III PURPOSE

The purpose for which the corporation is organized is: N/A

#### ARTICLE IV SHARES

The number of shares of stock is: 1,000

# ARTICLE V INITIAL OFFICERS/DIRECTORS (Optional)

The name(s) and address(es):

PEDRO LIRA - PRESIDENT

533 PENTA COURT

WESTON, FL. 33327

OSWALDO GUERRA

- VICE PRESIDENT

533 PENTA COURT WESTON, FL. 33327

## ARTICLE VI REGISTERED AGENT

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

533 PENTA COURT WESTON, FL. 33327

# ARTICLE V INCORPORATOR

The name and address of the Incorporator is:

PEDRO LIRA

533 PENTA COURT

WESTON, FL. 33327

Having been	named as re	gistered agent	to accept s	ervice of p	process fo	or the abo	ove stated	corporatio	in at the place	
designated in	n this certifig	ate, I am famil	iar with an	d accept the	he appoin	itment as	registere	i agent and	i agree to act	in this
capacity.	/_/	1 /								
	1/10	John	1							
		HOMA	<i>i</i>							

Signature/Registered/Agent

Date

Date