

PO3000079674

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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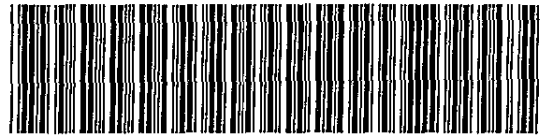
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TRANSMITTAL LETTER

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

SUBJECT: ALL SOLUTIONS MACHINE SHOP 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: JOEL RODRIGUEZ

Name (Printed or typed)

6575 W 4 AVE #506

Address

HIALEAH, FL. 33012

City, State & Zip

(305) 494- 8521

(305) 821-1561

Daytime Telephone number

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)

ARTICLE I NAME

The name of the corporation shall be:

ALL SOLUTIONS MACHINE SHOP INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

8049 NW 155 ST MIAMI LAKES, FL 33016

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

MAKE, REPAIR OR RESTORE METAL PARTS

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

JOEL RODRIGUEZ-- 6575 W 4 AVE #506 HIALEAH, FL 33012--- PRESIDENT & TREASURER

BAIRE CAMPANA--- 7401 W 22 AVE #204 HIALEAH, FL 33016--- VICEPRESIDENT & SECRETARY

ARTICLE VI REGISTERED AGENT

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

JOEL RODRIGUEZ--- 6575 W 4AVE #506 HIALEAH, FL 33012

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

BAIRE CAMPANA--- 7401 W 22AVE #204 HIALEAH, FL 33016

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

Joel Rodriguez
Signature/Registered Agent

06/23/03
Date

Baire Campana
Signature/Incorporator

06/23/03
Date

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03 JUL 18 AM 11:09
CLERK OF DISTRICT COURT
MIAMI COUNTY, FL