

PO5000037678

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

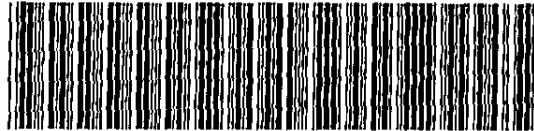
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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05/10/10 11:3:59

05/10/10 11:3:59

## TRANSMITTAL LETTER

Department of State  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32315

SUBJECT: PEDRO DERAS, INC.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is 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: **Pedro Deras**  
Name (Printed or typed)  
  
**4080 Fort Center Avenue**  
Address  
  
**LaBelle, FL, 33975**  
City, State & Zip  
  
**863-673-2217**  
Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE  
Glenda E. Hood  
Secretary of State

RECEIVED  
05 MAR 10 AM 11:12  
TALLAHASSEE, FLORIDA

March 2, 2005

PERDO DERAS  
P.O. BOX 1229  
LABELLE, FL 33975

SUBJECT: PEDRO DERAS, INC.  
Ref. Number: W05000010657

We have received your document for PEDRO DERAS, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must have a Florida street address. A post office box, personal mail box (PMB), or mail drop-box address is not acceptable.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6965.

Dorine Martin  
Document Specialist  
New Filings Section

Letter Number: 105A00014448

*\* Correction Attached \**

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED  
DIVISION OF REVENUE  
05 MAR 10 PM 3:59

ARTICLE I NAME

The name of the corporation shall be  
PEDRO DERAS, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

4080 Fort Center Avenue; LaBelle, Florida, 33935

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Engaging in the transaction of any and all business activities permitted under the laws of Florida and the United States of America.

ARTICLE IV SHARES

The number of shares of stock is:

One Hundred (100) valued at \$1.00 per share

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address:

Pedro Deras  
4080 Fort Center Avenue  
LaBelle, FL, 33935

ARTICLE VI REGISTERED AGENT

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

Pedro Deras  
4080 Fort Center Avenue  
LaBelle, FL, 33935

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Pedro Deras  
4080 Fort Center Avenue  
LaBelle, FL, 33935

\*\*\*\*\*

*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*

x Pedro Deras

Signature/Registered Agent

3-9-05

Date

x Pedro Deras

Signature/Incorporator

3-9-05

Date