

Box 18 PO 6000023184

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

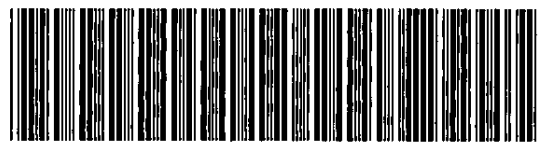
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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06 FEB 13 AM 8:59
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

2/16/06

Enclosed you will find
my request for Articles of
Incorporation. I have already filed
for the fictitious name.

Please contact me with any
questions.

Thank you,

Gonzalo Balta

954-464-1468

FauxFinishPaint@aol.com

COVER LETTER

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

SUBJECT: David Martin & CO. 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: GONZALO BALTA
Name (Printed or typed)

10854 NW 8th CT, #
Address

PLANTATION, FL 33324
City, State & Zip

(954) 464 1468
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:

DAVID MARTIN & CO. INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

10854 NW 8TH CT, PLANTATION, FL. 33324

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

PAINTING.

ARTICLE IV SHARES

The number of shares of stock is:

200 PAR-VALUE \$ 5.00

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

GONZALO BALTA
10854 NW 8TH CT, PLANTATION, FL. 33324
PRESIDENT

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

GONZALO BALTA
10854 NW 8TH CT, PLANTATION, FL. 33324

ARTICLE VII INCORPORATOR

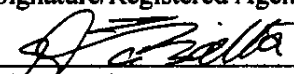
The name and address of the Incorporator is:

GONZALO BALTA
10854 NW 8TH CT, PLANTATION, FL. 33324

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

06 FEB 13 AM 8:59

FILED

2/8/06

Date

2/8/06

Date