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COVER LETTER

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

SUBJECT:C	OBO CORPORATION		
Sural and any an are	·	TE NAME - MUST INCL	
\$70.00 Filing Fee	iginal and one (1) copy of the arti \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status
FROM: _	ARMANDO COBO		
	8389 NW 8TH STREET,	(Printed or typed)	
		Address	
	MIAMI, FL 33186		
	City,	State & Zip	
	786-239-5016	elephone number	
	Day in it i	AND INTERIOR	

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



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 13, 2006

ARMANDO COBO 8389 NW 8TH ST., UNIT 12 MIAMI, FL 33186

SUBJECT: COBO CORPORATION Ref. Number: W06000017713

We have received your document for COBO CORPORATION and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name 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) 245-6047.

Carolyn Lewis Document Specialist New Filing Section

Letter Number: 506A00025256

COVER LETTER

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

SUBJECT:	AMERICA REPAIR CORPORATION
•	(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an orig	ginal and one (1) copy of the artic	cles 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	s87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED	
FROM:	OM: Armando Cobo			
8389 N.W. 8th St. Unit # 12				
Miami, Fl 33126 City, State & Zip				
	786-239-5016			
	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:

AMERICA REPAIR CORPORATION

FILED

06 MAY 11 PM 12: 14

SECRETARY OF STATE
TALLAMA STREE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

8389 N.W. 8th St. Unit #12, Miami, Fl 33126

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Flooring and Painting

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):

Armando Cobo, 8389 N.W. 8th St. Unit #12, Mia, FI 33126 President/Secretary Diana Cobo, 8389 N.W. 8th St. Unit #12, Miami, FI n33126 Vice Pres./Treasuar

ARTICLE VI REGISTERED AGENT

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

Armando Cobo, 8389 N.W. 8th St, Unit12, Miami, Fl 33126

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Jack I. Speers, Sr. 8389 N.W. 8th St. #11, Miami, Fl 33126

Having been named as registered agent to accept service of process for the abo certificate, I am familiar with and accept the appointment as registered agent and	l agree to act in this capacity
NOW.	08 May 2006
Signature/Registered Agent	Date
nedo	08 May 2006
Signature incorporator	Date