

POL0000144553

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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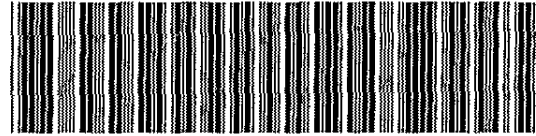
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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06 NOV 16 PM 4: 26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11/16
Sgt

COVER LETTER

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

SUBJECT: APOPKA FUEL, 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: BAIJNAUTH SINGH

Name (Printed or typed)

664 CIMAROSA CT

Address

OCOE FL 34761

City, State & Zip

407-684-2864

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:

APOPKA FUEL, INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

215 E MAIN STREET, APOPKA FL 32703

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO OPERATE A FUEL STATION AND CONVENIENCE STORE

ARTICLE IV SHARES

The number of shares of stock is:

100 SHARES

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

BAIJNAUTH SINGH - 664 CIMAROSA CT, OCOEE FL - PRESIDENT

ROMAH SINGH - 664 CIMAROSA CT, OCOEE FL - SECRETARY

ARTICLE VI REGISTERED AGENT

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

BAIJNAUTH SINGH - 664 CIMAROSA CT, OCOEE FL 34761

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

A & P ACCOUNTING AND COMPUTER SOLUTIONS, INC
2864 MAGNOLIA BLOSSOM CIR, CLERMONT FL 34711


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

11/13/2006

Date



Signature/Incorporator

11-11-2006

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA