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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

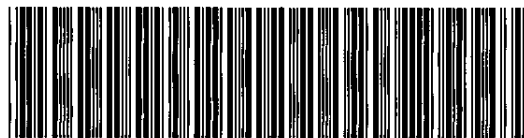
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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07 JAN 26 AM 9:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED

07 JAN 26 AM 9:46

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: Platinum Motoring & Detailing, 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: Chris Methis
Name (Printed or typed)

1512 Bgreback Dr.
Address

Tlh. Fl. 32310
City, State & Zip

(850) 402-9274
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:

Platinum Motoring & Detailing, Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

1512 1512 Bareback Dr.
Tln. Fl. 32310

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Auto Detailing (Mobile)

ARTICLE IV SHARES

The number of shares of stock is:

NO

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Inn Mathis - Owner
Chris Mathis CEO & President

ARTICLE VI REGISTERED AGENT

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

Chris Mathis
1512 Bareback Dr.
Tallahassee, FL 32310

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Chris Mathis
1512 Bareback Dr
Tallahassee, FL 32310

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

Date

Signature/Incorporator

Date

FILED
07 JAN 26 AM 9:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA