

PD7000052051

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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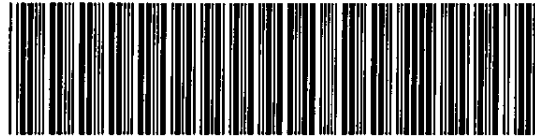
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: South Florida's Finest Auto 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: Monkerdrick L Williams
Name (Printed or typed)

19223 NW 34 Ct
Address

OP9-10ck9 FL 33056
City, State & Zip

305-620-7331
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:

South Florida's Finest Auto Detailing, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

19223 NW 34 Court
Opa-Locka FL 33056

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Business operation

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):

Monkeidrick L. Williams, officer + Director
19223 NW 34 Court
Opa-Locka FL 33056

ARTICLE VI REGISTERED AGENT

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

monkeidrick L. Williams
19223 NW 34 Court
Opa-Locka FL 33056

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

monkeidrick L. Williams
19223 NW 34 Court
Opa-Locka FL 33056

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

Monkeidrick L. Williams
Signature/Registered Agent

4/23/07
Date

Monkeidrick L. Williams
Signature/Incorporator

4/23/07
Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA