

PD7000113839

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

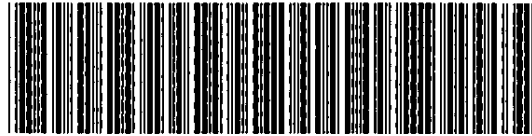
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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07 OCT 15 AM 8:40

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

VH

1-107-113839

COVER LETTER

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

SUBJECT: Apopka Custom Detailers  
(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: Frank Negrón  
Name (Printed or typed)

1815 Bonerly Cr.  
Address

Apopka Fl. 32703  
City, State & Zip

407-462-8145  
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 4, 2007

FRANK NEGRON  
1815 BONERLY CR  
APOPKA, FL 32703

SUBJECT: APOPKA CUSTOM DETAILERS  
Ref. Number: W07000049243

We have received your document for APOPKA CUSTOM DETAILERS and your check(s) totaling \$88.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

The person designated as incorporator in the document and the person signing as incorporator must be the same.

Please return the corrected 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) 245-6962.

Valerie Herring  
Regulatory Specialist II  
New Filing Section

Letter Number: 707A00058133

# ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

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## ARTICLE I NAME

The name of the corporation shall be:

*Apopka Custom Bet Detailers, Inc.*

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

*1815 Bonerly Cr.  
Apopka FL 32703*

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

*Any and all Lawful Bussiness*

## ARTICLE IV SHARES

The number of shares of stock is:

*5,000*

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

*Frank Negron (1815 Bonerly Cr. Apopka Fl. 32703) (Pres.)  
Jose C. Carrion (3102 Pell Mell Dr. Orlando Fl. 32818) (Vice Pres.)*

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE VI REGISTERED AGENT**

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

Frank Negron  
1815 Bonerly Cr.  
Apopka, FL 32703

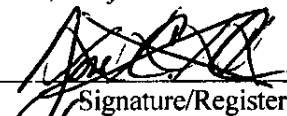
**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:


Frank Negron  
1815 Bonerly Cr.  
Apopka, FL 32703

\*\*\*\*\*

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

 10/11/07  
Signature/Registered Agent

10/2/07  
Date

  
Signature/Incorporator

10/2/07  
Date