

P08000034931

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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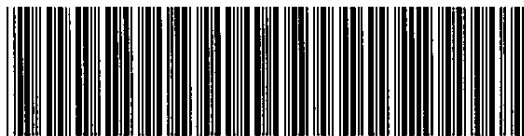
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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04/04/08--01018--008 **87.50

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2008 APR -4 P 4:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: DIEPPA SERVICES, 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: ALBERTO DIEPPA
Name (Printed or typed)

1698 S.W. CAISOR AV.
Address

PORT ST. LUCIE, FL 34953
City, State & Zip

561-215-3054
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:

DIEPPA SERVICES, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

1698 S.W. CAISOR AVE.
PORT ST. LUCIE, FL 34953

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

APPLIANCE DRAIN CLEANING

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):

PRESIDENT, SECRETARY, AND TREASURER.

ALBERTO DIEPPA
1698 S.W. CAISOR AVE.
PORT ST. LUCIE, FL.
34953

ARTICLE VI REGISTERED AGENT

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

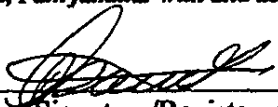
ALBERTO DIEPPA
1698 S.W. CAISOR AVE.
PORT SAINT LUCIE, FL 34953

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

ALBERTO DIEPPA
1698 S.W. CAISOR AVE
PORT ST. LUCIE, FL 34953

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



Signature/Incorporator

FILED
2008 APR - 11 P 4:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

4-2-08

Date

4-2-08

Date