P09000006712

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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09 JAN 21 PM 4:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

-1399

COVER LETTER

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

SUBJECT: ALFREDO'S PAINTING & REPAIR COMPANY
(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: ALFREDO HERNANDEZ
Name (Printed or typed)

P. O. BOX 403
Address

INTERCESSION CITY, FL 33848
City, State & Zip

321/443-2434
Daytime Telephone number

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

APPROVED
AND
FILED

09 JAN 21 PM 4:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

ALFREDO'S PAINTING & REPAIR COMPANY

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

P.O. BOX 403 (MAILING ADDRESS)
INTERCESSION CITY, FL 33848

1563 TALLAHASSEE BLVD
INTERCESSION CITY, FL
33848

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is:

1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

ALFREDO HERNANDEZ, PRESIDENT
P.O. BOX 403
INTERCESSION CITY, FL 33848

YVONNE HERNANDEZ, VICE PRESIDENT
P.O. BOX 403
INTERCESSION CITY, FL
33848

ARTICLE VI REGISTERED AGENT

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

ALFREDO HERNANDEZ
P.O. BOX 403 (MAILING ADDRESS)
INTERCESSION CITY, FL 33848

ALFREDO HERNANDEZ
1563 TALLAHASSEE BLVD
INTERCESSION CITY, FL
33848

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

ALFREDO HERNANDEZ
P.O. BOX 403
INTERCESSION CITY, FL 33848

****

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 — January 5, 09
Date

Signature/Incorporator — January 5, 09
Date