## 9000102790

(Requestor's Name)		
( to quotien o training)		
(Address)	70016383	
(Address)	10010000	
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL	,	
(Business Entity Name)	12/24/0901037	
(Document Number)	<del>.</del> .	
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		
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	SEE, FLI	

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D. A. WHITE

## **COVER LETTER**

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

SUBJECT: D'Mar P	arts Corporation (PROPOSED CORPORA	ATE NAME – MUST INCL	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	a check for:
\$70.00 Filing Fee	■ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status
FROM: D'	Mar Parts Corp Nam	e (Printed or typed)	
_150	31 West 49TH Street # 199	Address	<u> </u>
<u>Hia</u> l	eah, FL 33012 City	State & Zip	
787	-385-6077	Telephone number	
dma	rparts@yahoo.com	ed for future annual report r	notification)

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)	FILED
ARTICLE I NAME The name of the corporation shall be:	2009 DEC 24 ₱ 1: 18
D'Mar parts corp.	SECRETARY OF STATE TALLAHASSEE. FLORIDA
ARTICLE II PRINCIPAL OFFICE  The principal street address and mailing address, if different is:	33012
6195 West 18 Ave # 6128 Hialeal	Y FL Joe
ARTICLE III PURPOSE  The purpose for which the corporation is organized is:  Distribution of Construction, Indust  Machinery Parts	rial and Agricultural
ARTICLE IV SHARES The number of shares of stock is:	
ten thousand shares @ \$100.00 po	ar value
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s):  Daniel Marin 6195 W 18 Dre # 6128 Higher, FL	33012
The name and Florida street address (P.O. Box NOT acceptable) of the r	egistered agent is:
Doniel Marin 6195 W 18 Ave # G128 Hialeah F	L 33012
ARTICLE VII INCORPORATOR The name and address of the Incorporator is:	
Daniel Marin 6195 W 18 Ave # 6128 Hraleah Fl	_ 33012
*****	********
Having been named as registered agent to accept service of process for place designated in this certificate, I am familiar with and accept the agree to act in this capacity	rme above stated corporation at the appointment as registered agent and
Quili.	12-22-09
Signature/Incorporator	Date  12-22-09  Date
Signature memperator	#* ··· · #