

P10000015719

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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2/22

COVER LETTER

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

SUBJECT: Freddy Transmission Corp
(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 Peguero
Name (Printed or typed)

17148 SW 142 Ct
Address

miami, Fl. 33177
City, State & Zip

786-234-4648
Daytime Telephone number

n/a
E-mail address: (to be used for future annual report 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)

ARTICLE I NAME

The name of the corporation shall be:

Freddy Transmission Corp.

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

13827 SW 142 Ave
Miami, Fl. 33186

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Business for repair of transmissions.

ARTICLE IV SHARES

The number of shares of stock is: 1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Alfredo Peguero owner
13827 SW 142 Ave
Miami, Fl. 33186

ARTICLE VI REGISTERED AGENT

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

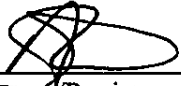
Alfredo Peguero
13827 SW 142 Ave
Miami, Fl. 33186

ARTICLE VII INCORPORATOR

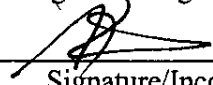
The name and address of the Incorporator is:

Alfredo Peguero
13827 SW 142 Ave
Miami, Fl. 33186

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2/16/10

Date

2/16/10

Date