

P10000023949

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

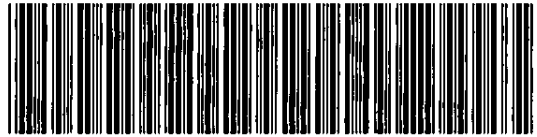
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10 MAR 17 AM 10:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

3-18-10 CB

COVER LETTER

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

SUBJECT: Milan's Auto Repair, 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: Abdiel Rivera, Jr.
Name (Printed or typed)

14114 Village View Drive
Address

Tampa, Florida 33624
City, State & Zip

813.217.2703
Daytime Telephone number

milanservicedepartment@gmail.com
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:

Milan's Auto Repair, Inc.

ARTICLE II PRINCIPAL OFFICE

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

Street Address: 6001 Johns Road, Ste 534, Tampa, FL 33634

Mailing Address: 14114 Village View Drive, Tampa, FL 33624

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
to engage in any lawful activity

ARTICLE IV SHARES

The number of shares of stock is:

4

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Abdiel Rivera Jr
CEO

ARTICLE VI REGISTERED AGENT

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

Abdiel Rivera, Jr.
14114 Village View Drive
Tampa, FL 33624

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Abdiel Rivera, Jr.
14114 Village View Dr.
Tampa, FL 33624

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



Date



Date

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA