

P10000028401

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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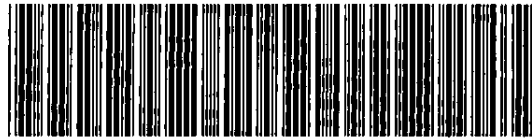
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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COVER LETTER

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

SUBJECT: _____

Alex Mechanic Shop, 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: _____

Eduardo Martinez
Name (Printed or typed)

3924 A Street
Address

Jane Worth, FL 33461
City, State & Zip

561-436-1481
Daytime Telephone number

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:

Alex Mechanic Shop, Inc.

ARTICLE II PRINCIPAL OFFICE

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

3924 A Street
Lake Worth, FL 33461

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Mechanic

ARTICLE IV SHARES

The number of shares of stock is: 10

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Eduardo Martinez President

ARTICLE VI REGISTERED AGENT

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


Eduardo Martinez 3924 A Street
Lake Worth, FL 33461

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Eduardo Martinez 3924 A. Street
Lake Worth, FL 33461

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

3-29-10

Date

* 

Signature/Incorporator

Date

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TALLAHASSEE, FLORIDA