

P10000089797

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

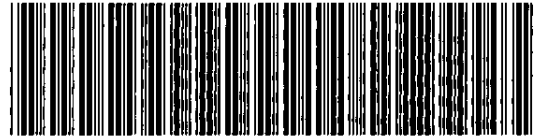
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



400187070634

10/29/10--01020--014 \*\*78.75

FILED

10 OCT 29 PM 4:02  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Ps 11/4/10

## COVER LETTER

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

SUBJECT: Advanced Oil Depot, 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: Frank Bologna

Name (Printed or typed)

1900 Biltmore Street

Address

Port St. Lucie, FL 34984

City, State & Zip

772-408-6507

Daytime Telephone number

PSLAUTOREPAIR@COMCAST.NET

E-mail address: (to be used for future annual report notification)

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

Department of State  
New Filing Section  
Division of Corporations  
PO Box 6327  
Tallahassee, FL 32314

Date: October 20, 2010

Dear Sirs:

Please find articles of Incorporation for ADVANCED OIL DEPOT, INC.. These are to replace the attached copy of the Articles of Organization for the LLC. Please note that a refund of \$72.50 needs to be issued.

Sincerely,

Frank Bologna

A handwritten signature in black ink, appearing to read "Frank Bologna", written in a cursive style.

**ARTICLES OF INCORPORATION**

• In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

**ARTICLE I NAME** Advanced Oil Depot, Inc.  
The name of the corporation shall be:

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
1900 Biltmore Street  
Port St. Lucie, FL 34984

Mailing address, if different is:

**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: One hundred

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Frank Bologna President  
Address: 1900 Biltmore Street  
Port St. Lucie, FL 34984

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

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

Name: Alessandra Bologna  
Address: 1900 Biltmore Street  
Port St. Lucie, FL 34984

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:


Name: Frank Bologna  
Address: 1900 Biltmore Street  
Port St. Lucie, FL 34984

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

*her*   
Required Signature/Registered Agent

10/20/10  
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

*hem*   
Required Signature/Incorporator

10/20/10  
Date

FILED  
OCT 29 PM 4:02  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA