

P11000012290

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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2011 FEB -3 AM 11:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Shivers FEB 04 2011

COVER LETTER

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

SUBJECT: PCPB, 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: COLIN JOHNSTON
Name (Printed or typed)
5409 Overseas Hwy #63
Address
Marathon, FL 33050
City, State & Zip
305 923 9526
Daytime Telephone number
AFRICANKOR@AOL.COM
E-mail address: (to be used for future annual report notification)

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TALLAHASSEE, FLORIDA

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: PCPB, INC.

ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address

720 50TH. ST.

MARATHON

FL 33050

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: CONSULTING.

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: PRAXEDES A. MARQUEZ

Address: 720 50TH. ST.

MARATHON

FL 33050

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: COLIN JOHNSTON

Address: 5409 OVERSEAS HWY #63

MARATHON FL 33050

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: COLIN JOHNSTON

Address: 5409 OVERSEAS HWY #63

MARATHON FL 33050

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

Required Signature/Registered Agent

1/31/11
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.

Required Signature/Incorporator

1/31/11
Date

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