

P110000045247

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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2011 MAY -9 PM 2:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SL
4-27-11 1111000004524733

COVER LETTER

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

SUBJECT: PMCrucilla Enterprises 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: Phillip Crucilla

Name (Printed or typed)

2830 NE 5Th Ave

Address

Boca Raton, Fl. 33431

City, State & Zip

561-231-1936

Daytime Telephone number

bocacru@aol.com

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

SECRETARY OF STATE
TALLAHASSEE, FL 32314

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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 PMCrucilla Enterprises Inc.
The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address
2830 NE 5Th Ave
Boca Raton FL 33431

Mailing address, if different is:

Same

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
Wallpapering

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Phillip Crucilla Pres
Address: 2830 NE 5TH Ave
Boca Raton, FL 33431

Name and Title: _____
Address: _____

Name and Title: Phillip Crucilla V. Pres
Address: 2830 NE 56Th Ave
Boca Raton, FL 33431

Name and Title: _____
Address: _____

Name and Title: Phillip Crucilla Sec.
Address: 2830 NE 5Th Ave
Boca Raton, FL 33431

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: Phillip Crucilla
Address: 2830 NE 5TH AVE
BOCA RATON, FL 33431

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Phillip Crucilla
Address: 2830 NE 5Th Ave
Boca Raton, FL 33431

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

5/4/2011

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

04/11/2011

Date

2011 MAY -9 PM 2:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

11 MAY -9 AM 11:22

DIVISION OF CORPORATIONS

April 27, 2011

PHILLIP CRUCILLA
2830 NE 5TH AVENUE
BOCA RATON, FL 33431

SUBJECT: PMCRUCILLA ENTERPRISES INC.
Ref. Number: W11000023633

We have received your document for PMCRUCILLA ENTERPRISES INC. and your check(s) totaling \$105.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain a registered agent with a Florida street address and a signed statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6924.

Sharon Collins
Regulatory Specialist II

Letter Number: 611A00010267