

P1100002716

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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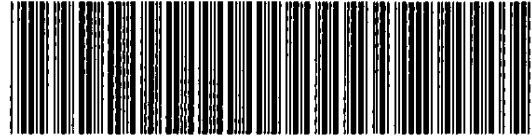
(Business Entity Name)

(Document Number)

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

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
11 JUL 11 PM 2:28

Ps 7/12/11

## COVER LETTER

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

SUBJECT: A & W Autobody 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: April Niebel

Name (Printed or typed)

4361 Okeechobee Blvd Unit A-5

Address

West Palm Beach, FL 33409

City, State & Zip

516-852-2234

Daytime Telephone number

aandwautobody@yahoo.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**

**A & W Autobody, Inc.**  
The name of the corporation shall be:

## **ARTICLE II PRINCIPAL OFFICE**

Principal street address  
4361 Okeechobee Blvd, Unit A-5  
West Palm Beach, FL 33409

Mailing address, if different is:  
11770 Inverness Circle  
Wellington, FL 33414

## **ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:  
To repair the auto bodies

## **ARTICLE IV SHARES**

The number of shares of stock is: 100

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

Name and Title: April Niebel, President  
Address: 11770 Inverness Circle  
Wellington, FL 33414

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

Name and Title: Wilberto Larriuz, Vice President  
Address: 11770 Inverness Circle  
Wellington, FL 33414

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: April Niebel  
Address: 11770 Inverness Circle  
Wellington, FL 33414

## **ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: April Niebel  
Address: 11770 Inverness Circle  
Wellington, FL 33414

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*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:

07/07/2011

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

07/07/2001

Date