

P/2000004865

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

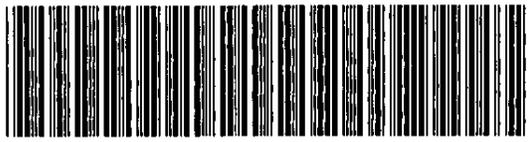
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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12 JAN 12 PM 4:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

κ 01/13/12

COVER LETTER

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

SUBJECT: BORON LUBRICANTS 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: William Olliges
Name (Printed or typed)

5027 SW Moore St.
Address

Palm City, FL 34990
City, State & Zip

772-486-4020
Daytime Telephone number

olliges@hotmail.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

Boron Lubricants Inc.

The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address
5027 SW Moore St.
Palm City, FL, 34990

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

For Profit Corporation

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: William Olliges, CEO Name and Title: Betty Olliges, President
Address: 5027 SW Moore St. Address: 5027 SW Moore St.
Palm City, FL 34990 Palm City, FL 34990

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: William Olliges
Address: 5027 SW Moore St.
Palm City, FL 34990

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: William Olliges
Address: 5027 SW Moore St.
Palm City, FL 34990

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TALLAHASSEE, FLORIDA

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

Jan 09, 2014

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

Jan 09, 2014

Date