

A 2000/8858

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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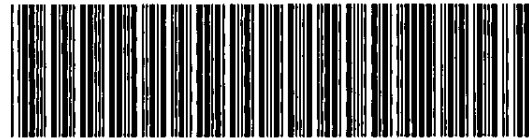
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 FEB 22 AM 11:00

442 7920 1/24/12



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED
12 FEB 22 AM 11:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

February 9, 2012

KEVIN DUBROCQ
650 E 32 ST
HIALEAH, FL 33013

SUBJECT: NEW WAVE SUPPLIES INC.
Ref. Number: W12000007920

We have received your document for NEW WAVE SUPPLIES INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

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) 245-6901.

Pamela Smith
Regulatory Specialist II

Letter Number: 212A00005736

COVER LETTER

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

SUBJECT: **NEW WAVE SUPPLIES 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: **KEVIN DUBROCQ**

Name (Printed or typed)

650 E 32 ST

Address

HIALEAH, FL 33013

City, State & Zip

305-610-2040

Daytime Telephone number

RODEOLS@BELLSOUTH.NET

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)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

ARTICLE I NAME

The name of the corporation shall be:

NEW WAVE SUPPLIES INC.

12 FEB 22 AM 11:00

ARTICLE II PRINCIPAL OFFICE

Principal street address

650 E 32 ST
HIALEAH, FL
33013

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: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: KEVIN DUBROCC
Address: PRESIDENT
650 E 32 ST
HIALEAH, FL 33013

Name and Title: LAZARO FERNANDEZ
Address: VICE PRESIDENT
3640 W 1 AVE
HIALEAH, FL 33012

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: KEVIN DUBROCC
Address: 650 E 32 ST
HIALEAH, FL 33013

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: KEVIN DUBROCC
Address: 650 E 32 ST
HIALEAH, FL 33013

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

02/03/2012

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

02/03/2012

Date