

(Ke	questor's Name)	,		
(Ad	dress)			
(Ad	dress)			
(Cit	y/State/Zip/Phon	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
(50	cument (tumber)			
Certified Copies	Certificate	s of Status		
Special Instructions to Filing Officer:				
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Office Use Only



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COVER LETTER

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

SUBJECT: Diaz Pressure (PROPOSED CORPORA)	Washing Inc. TENAME-MUST INCLUDE SUFFIX				
Enclosed are an original and one (1) copy of the artic	cles of incorporation and a check for:				
\$70.00 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED				
FROM: April L. Name					
Haines City FL 33844 City, State & Zip					
(863) 242.	-0769 or (863) 268 - 3544				
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 No.	AME ration shall be: Diaz Pressure Wo	ishing, Inc.	
ARTICLE II P	RINCIPAL OFFICE		
	Principal street address 07 Rhodes Rd North Lines City, FL 33844	Mailing address, if different is:	
ARTICLE III PU	RPOSE		walning
The purpose for which	RPOSE the corporation is organized is: to provide Services.	e pressure	ousverg
ARTICLE IV Si	HARES of stock is: 100		
Name and Title Address:	April L Neal President Name 1007 Rhodes Rd North Additions City, FL 33844	e and Title:ess:	
Name and Title Address:	Ashley M Diaz, V. President Nam 1107 Phodes Rd North Addi Hoines City, FL 33844		
Name and Title Address:	Nam Addi	e and Title:ess:	
ARTICLE VI RI	EGISTERED AGENT	***************************************	
	A street address (P.O. Box NOT acceptable) of the reg APril L. Neal 1167 Rhocks Rd North Haines City FL 33844	istered agent is:	Z JUN -1
ARTICLE VII IN	CORPORATOR		3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3
The name and address Name: Address:	April L. Neal 1107 Rhodes Rd North Haines City Fr 33844		7: 52
	as registered agent to accept service of process for the appointment as registered of the appointment as registered or the appointment as a registered o		
Upr	L X. Neal Required Signature/Registered Agent		5/29/12
T	Required Signature/Registered Agent		Date
	nt and affirm that the facts stated herein are true. I rtment of State constitutes a third degree felony as pro		formation submitted in a
aramen w me Depu	il L. Neal	rmou jur no 3102/1223, Pusi	5/29/12
—— 	Required Signature/Incorporator	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Date