

(Re	equestor's Name)			
(Ac	ldress)			
(Ac	ldress)			
(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	MAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to	_	GAVE		
AUTHORIZATION BY PHONE TO				
DATE 11/26/2012				
DATE TITLE DATE SOON.				
Office Hea Only				



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SECRETARISE PLORIDA

11/H J2-57487

COVER LETTER

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

141141143300, 1 12 323	. •		
SUBJECT: ADV	ANCE PINTO N	MAINTENACE	INC
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	<u>UDE SUFFIX</u>)
Enclosed are an origi	inal and one (1) copy of the art	ticles of incorporation and	d a check for:
\$70.00 Filing Fee		\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	& Certificate of Status
,	g German Tanas Kabu	gerander en a	
FROM: D	RACO PINTO		
	Nam	e (Printed or typed)	
69	955 COLLEGE C	COURT	
		Address	
D	AVIE FL 33317		
	City	, State & Zip	
(9	754) 548-778	'Z	

NOTE: Please provide the original and one copy of the articles.

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

November 8, 2012

Dear Sir/Madam:

My name is Draco Pinto owner of Advance Pinto Maintenace Inc. I'm writing this letter to inform that I will not be reinstated this Corp. I like to request your permission to open another Corporation using the same name: Advance Pinto Maintenance Inc.

Your help is really appreciated.

Sincerely,

Draco Pinto

SECRETARY OF STATE
TALL AHASSEE FLORIDA

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I The name of the	NAME corporation shall be: Advance Pr	nto MAINTENANO	ce Inc
ARTICLE II	PRINCIPAL OFFICE		•
11111111111	Principal street address 6955 COLLEGE COURT DAVIÉ FL 33317	Mailing addres	ss, if different is:
ARTICLE III The purpose for v	PURPOSE which the corporation is organized is:	·	
Name and T	ares of stock is: INITIAL OFFICERS AND/OR DIRECT Title: DRAGO PINTO	Name and Title:	
Address:	6955 COLLEGE COURT DAVIS FL 33317	·	
Name and T Address:	Title:	Address:	
Name and T Address:	itle:		
ADTICLE III	DECICTEDED ACEUM		
	REGISTERED AGENT Orida street address (P.O. Box NOT acceptable DRACO PINTO 6955 COLLEGE COURT DAVIE FL 33317	e) of the registered agent is:	HOV 26 AM CRETARY OF LAHASSEE
ARTICLE VII	INCORPORATOR		F. = 0
	dress of the Incorporator is: DRACO PINTO 6955 COLLEGE COURT DAVIS FL 33317		S8 SRIDA
	ned as registered agent to accept service of process of the service of process function and accept the appointment as		
	Required Signature/Registered Agent		/ / Date
	ument and affirm that the facts stated herein a Department of State constitutes a third degree fe		

Required Signature/Incorporator