

P13000085258

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

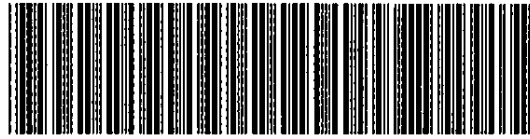
(Business Entity Name)

(Document Number)

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

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13 OCT 16 AM 7:50  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

**COVER LETTER**

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

SUBJECT: Porce Plumbing 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: Nick Wilmot - Debbie's Accounting  
Name (Printed or typed)

3575 Southside Blvd  
Address

Jacksonville, FL 32216  
City, State & Zip

904-733-4547  
Daytime Telephone number

tomcrego@dol.com  
E-mail address: (to be used for future annual report notification)

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

Thomas Ponce  
Ponce Plumbing Inc  
4642 College Street  
Jacksonville, FL 32202

904-388-7502  
or

904-207-5309

October 9, 2013

RE: Florida Profit Corporation

To whom it may concern:

This letter is to formally state that I Thomas Ponce no longer want to do business in the state of Florida under the document number P10000045929. I am submitting a new Articles of Incorporation to get a new document number assigned. I would like to keep my current name, address and registered agent but simply would like to get a new document number.

If you have any further questions please don't hesitate to contact me.

Thank you,

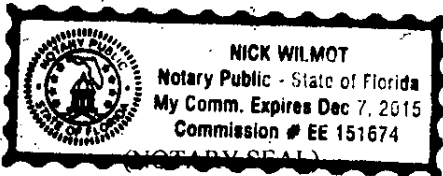
Thomas Ponce  
President



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19 OCT 16 AM 7:50  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

STATE OF FLORIDA COUNTY OF Duval Sworn to (or affirmed) and subscribed before me this 9 day of October, 2013, by

Thomas Ponce (name of person making statement)



Signature of Notary Public-State of Florida

Nick Wilmot

(Name of Notary Typed, Printed, or Stamped)

Personally Known  OR Produced Identification  Type of Identification Produced Florida Drivers License

**ARTICLES OF INCORPORATION**

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

**ARTICLE I NAME**

The name of the corporation shall be:

Ponce Plumbing Inc

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

4642 College Street  
Jacksonville, FL 32205

**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:

Thomas Ponce PVST

Name and Title:

Address

4642 College Street

Address:

Jacksonville, FL 32205

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

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TALLAHASSEE FLORIDA

(conti.)

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: Thomas Ponce  
 Address: 4642 College Street  
Jacksonville, FL 32202

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Thomas Ponce  
 Address: 4642 College Street  
Jacksonville, FL 32202

*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*

Thomas Ponce  
 Required Signature/Registered Agent

10/9/13  
 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.*

Thomas Ponce  
 Required Signature/Incorporator

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