(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
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SECRETARY OF STATE



## RECEIVED

# FLORIDA DEPARTMENT OF STATE Division of Committee Division of Com **Division of Corporations**

SECRETARY OF STATE TALLAHASSEE, FLORIDA

October 11, 2013

POMPEYO BONILLA **401 NE MAINSAIL ST** PORT SAINT LUCIE, FL 34983.

SUBJECT: P & E MARINE DETAILING, INC

Ref. Number: W13000056812

We have received your document for P & E MARINE DETAILING, 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 person designated as incorporator in the document and the person signing as incorporator must be the same.

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) 245-6052.

Pamela Smith Regulatory Specialist II

Letter Number: 513A00023947

### **COVER LETTER**

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

SUBJECT: P & E MARINE Detailing, Inc.				
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFLX)	
Enclosed are an orig	inal and one (1) copy of the art	cicles of incorporation and	d a check for:	
\$70.00	\$78.75	\$78.75	\$87.50	
Filing Fee	Filing Fee	Filing Fee	Filing Fee,	
	& Certificate of Status	& Certified Copy	Certified Copy & Certificate of Status	
		ADDITIONAL CO		
1 KOWI	ompeyo Bonilla Nam D1 NE Mainsail S	e (Printed or typed)	·	
40		Address		
5				
P(	ort Saint Lucie, F			
	City	, State & Zip		
77	72-626-4855			
	Daytime 7	Telephone number		
bo	onillapompeyo@	yahoo.com		
	E-mail address: (to be use	ed for future annual report	notification)	

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

FILED

ARTICLES OF INCORPORATION SECRETARY OF STATE
In compliance with Chapter 607 and/or Chapter 621, F.S. (PHYTS) ION OF CORPORATIONS

ARTICLE I NAM The name of the corporati	E Marine D	etailing, li	nc 13 OCT 23 PH 12: 57
ARTICLE II PRIN	ICIPAL OFFICE Principal street address		Mailing address, if different is:
		<del></del>	
ARTICLE III PURI The purpose for which the	POSE  to establish	sh a for profit i	marine detailing business
ARTICLE IV SHA The number of shares of	RES stock is:		
	<u>rat officers and/or director</u> Pompeyo Bonilla		Edgard Velasquez/Co-Owner
Address	401 NE Mainsail St	_ Name and The	401 NE Mainsail St
	Port Saint Lucie, Fl 34983	<del></del>	Port Saint Lucie, Fl 34983
		_	
Name and Title	·	_ Name and Title	÷
Address		_ Address:	
		_	
		-	<u> </u>
Name and Title	•	_ Name and Title	:
Address		_ Address:	

Fright,

FILED (conti.)
SECRETARY OF STATE
DIVISION OF CORPORATIONS

13 OCT 23 PH 12: 57

Name an	d Title:	Name and Title:
Address		Address:
		· · · · · · · · · · · · · · · · · · ·
ARTICLE VI	REGISTERED AGENT	
	lorida street address (P.O. Box NOT acceptable) of	the registered agent is:
Name:	Pompeyo Bonilla	
Address:	401 Mainsail St	
	Port Saint Lucie, Fl 34983	
A DATA TO THE	TI/COPPOR 4 MOP	
ARTICLE VII	INCORPORATOR	
The name and a	ddress of the Incorporator is:	
Name:	Pompeyo Bonilla	
Address:	401 NE Mainsail St	
	Port Saint Lucie, FI 34983	
	med as registered agent to accept service of process am familiar with and accept the appointment as reg	. ,
	Required Signature/Registered Agent	/0-/8-13 Date
I submit this doc document to the		true. I am aware that the false information submitted in a y as provided for in s.817.155, F.S.
	/	