

P 13 0000 90356

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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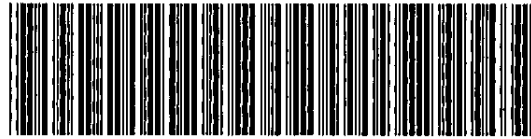
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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DIVISION OF CORPORATIONS
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12 11/5/13

COVER LETTER

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

SUBJECT: **Petroquipment Corp.**

(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: ^{SDAL} **Sullivan Diaz Man**

Name (Printed or typed)

123 4th Avenue

Address

Cape Coral, Florida 33993

City, State & Zip

239-220-1072

Daytime Telephone number

petroquipment@outlook.com

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 NAME

The name of the corporation shall be: Petroquipment Corp.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

6742 Forest Hill Blvd., # 123

West Palm Beach, FL 33413

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: All lawful purpose.

ARTICLE IV SHARES

The number of shares of stock is: 200

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Sulien Diaz Man

Name and Title: _____

Address 123 NW 4th Ave.

Address: _____

Cape Coral, FL 33993

Vice President

Name and Title: Sulin Tabor

Name and Title: _____

Address 405 NW 18th Ave.

Address: _____

Cape Coral, FL 33993

Vice President

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

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(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: Sulien Diaz Man
Address: 123 NW 4th Ave.
Cape Coral, FL 33993

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

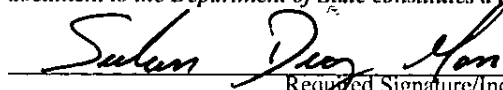
Name: Sulien Diaz Man
Address: 123 NW 4th Ave.
Cape Coral, FL 33993

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

10/30/13
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.


Required Signature/Incorporator

10/30/13
Date

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