

P14000010417

(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

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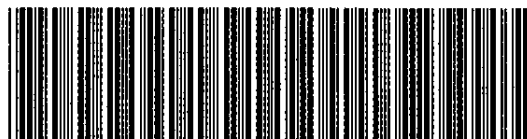
(Business Entity Name)

(Document Number)

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STATE OF FLORIDA
TALLAHASSEE, FLORIDA
14 JAN 29 AM 10:08

K 02/05/14

COVER LETTER

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

SUBJECT: **ATLANTIC DIESEL PARTS CORPORATION**
(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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input checked="" type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: **ENRIQUE F. DORIA**
Name (Printed or typed)
10510 SW 157 CT. APT # 103
Address
MIAMI, FLORIDA 33196
City, State & Zip
786-236-9645
Daytime Telephone number
newayinterior@yahoo.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: ATLANTIC DIESEL PARTS CORPORATION

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

10510 SW 157 CT. apt.102
MIAMI, FLORIDA 33196

ARTICLE III PURPOSE

DISTRIBUTION, BUY & SALE, IMPORT & EXPORT MECHANICAL EQUIPMENT, DIESEL EQUIPMENT, VEHICLES AND ACCESSORIES

The purpose for which the corporation is organized is: _____

ARTICLE IV SHARES 100

The number of shares of stock is: _____

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: ENRIQUE DORIA, PRESIDENT

Name and Title: NICOLAS GOMEZ, VICE-PRESIDENT

Address 10510 SW 157 CT. apt. 102 MIAMI, FLORIDA 33196

Address: 13101 SW 116 STREET MIAMI, FLORIDA 33186

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

(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: **ENRIQUE F. DORIA**
Address: 10510 SW 157 CT. apt 102 MIAMI FLORIDA 33196

14 JAN 29 AM 10:02
FALLA ASSOCIATES, FLORIDA

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: **ENRIQUE DORIA**
Address: 10510 SW 157 CT # 102
MIAMI, FL 33196

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

01/26/14

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

01/26/14

Date