

PI4000055131

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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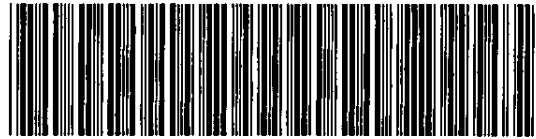
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

COVER LETTER

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

SUBJECT: NATIPJ DISTRIBUTIONS 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status
ADDITIONAL COPY REQUIRED

FROM: PEDRO M GARCIA JR

Name (Printed or typed)

711 ST LUCIE LN

Address

ORLANDO FL 32807

City, State & Zip

407-257-3648

Daytime Telephone number

PEDROMGARCIAJR@AOL.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: NATIPJ DISTRIBUTIONS INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

711 ST LUCIE LN

ORLANDO FL 32807

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: DISTRIBUTION OF PRODUCT

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: PEDRO M GARCIA JR, PRESIDENT

Name and Title: _____

Address

711 ST LUCIE LN
ORLANDO FL 32807

Address: _____

Name and Title: _____

Name and Title: _____

Address

Address: _____

Name and Title: _____

Name and Title: _____

Address

Address: _____

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

(cont.)

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: PEDRO M GARCIA JR
Address: 711 ST LUCIE LN
ORLANDO FL 32807

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: PEDRO M GARCIA JR
Address: 711 ST LUCIE LN
ORLANDO FL 32807

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

Pedro M Garcia Jr
Required Signature/Registered Agent

06-19-2014

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.

Pedro M Garcia Jr
Required Signature/Incorporator

06-19-2014

Date

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JUN 23 PM 4:03
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TALLAHASSEE, FLORIDA