P14000083960

| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| ريد (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: Ken GAVE AUTHORIZATION BY PHONE TO CORRECT Add (1) Share DATE 10 13/14 DOC. EXAM WHY 5934 |

Office Use Only



000264724720

09/26/14--01033--002 **78.75

SECRETARY OF STATE

AFFINOVED FILED

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VA

COVER LETTER

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

| SUBJECT: Pr | istine Moi | bile Deta | iling In |
|-------------------------|--|---------------------------------------|--|
| , | (PROPOSED CORPORA | TE NAME – <u>MŲST INCL</u> | IDE SUFFIX) |
| Enclosed are an orig | inal and one (1) copy of the art | icles of incorporation and | l 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: | Ken Hernar Ne/2 Indie | e (Printed or typed) Address | £ |
| | Miramar City, | FL 330. State & Zip | 23 |
| | 957/-5 | 59-1952 Felephone number | 4 |
| | Kenhsocia E-mail address: (to be use | d for future annual report | COM notification) |

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

September 16, 2014

Department of State
Division of Corporations
Corporate Filings
P.O. Box 6327
Tallahassee, FL 32314

To Whom It May Concern;

This letter is to inform you that, I Ken Hernandez President of Pristine Mobile Detailing, Inc., have voluntarily dissolved the corporation and have attached the proof of dissolution as well as the Electronic Articles of Incorporation for Pristine Mobile Detailing, Inc.

I have no intention of revoking the dissolution of Pristine Mobile Detailing Inc. I have also sent a money order for \$78.75 to start a new corporation with the same business name Pristine Mobile Detailing, Inc. which includes the certified copy.

Sincerely,

Ken Hemandez



FLORIDA DEPARTMENT OF STATE Division of Corporations

October 2, 2014

KEN HERNANDEZ ***2ND ML*** 7612 INDIGO STREET MIRAMAR, FL 33023

SUBJECT: PRISTINE MOBILE DETAILING, INC.

Ref. Number: W14000059391

We have received your document for PRISTINE MOBILE DETAILING, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

Please return the corrected original and one copy of 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.

Valerie Herring Regulatory Specialist II New Filing Section

Letter Number: 014A00020811

APPHOVEL: AND FILED

ARTICLES OF INCORPORATION ce with Chanter 607 and/or Chanter 621, F.S. (Profit)

| | 14 OCT 10 PH 12: 1 |
|---|-----------------------------------|
| The name of the corporation shall be: Pristing | ne Mobile Detailing The |
| ARTICLE II PRINCIPAL OFFICE | WELLWASSEE, FLORIDA |
| Principal street address | Mailing address, if different is: |
| 16/2 Indigo Otre | et |
| Mira mar 51 235 | 723 |
| 11/14/1/W, PC 500 | |
| | |
| ARTICLE III PURPOSE The purpose for which the corporation is organized is: | Any and All Cawful |
| Business | 7 |
| ()W)//W | |
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| | |
| ARTICLE IV SHARES | |
| The number of shares of stock is: | |
| ADMICE TO THE PROPERTY APPROPRIES AND ADDITIONS OF THE PERSON | ATRIPOTO DO |
| ARTICLE V INITIAL OFFICERS AND/OR I | |
| Name and Title: Ken Hernande | 2 President Title: |
| Address NG/2 Indian | Stratadoras |
| 1.2 | 7/ 225 20 |
| Miramar t | (1) (1) (1) (1) |
| | |
| | |
| Name and Title: | Name and Title: |
| Name and Title: | Name and Title. |
| Address | Address: |
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| | |
| Name and Title: | Name and Title: |
| | |
| Address | Address: |
| | |
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14 OCT 10 PM 12: 14

| Name and Title: | _ Name and Title: | SECRETARY OF STATE TAULAHASSEE, D. ORIDA | | |
|--|---|---|--|--|
| Address | Address: | | | |
| | | | | |
| | | | | |
| ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) Name: Ken Hennande 2 Address: 7/e/2 Indian Street | of the registered agent | is: | | |
| Miramar PL 330 | 23 | | | |
| ARTICLE VII INCORPORATOR | | | | |
| The <u>name and address</u> of the Incorporator is: | | | | |
| Name: Ren Herrianae Address: Nel2 Indigo St | eet | | | |
| Miramar Fl 3 | 13023 | | | |
| Having been named as registered agent to accept service of proce this certificate, I am familiar with and accept the appointment as re | ss for the above stated egistered agent and ag | l corporation at the place designated in ree to act in this capacity | | |
| Required Fignature/Registered Agent | | 9/10/14 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 | | 9/14/14 | | |