

P/4000102614

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

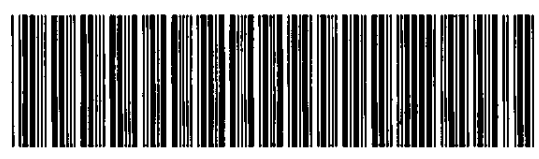
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

ADDED ", CORP." TO ARTICLE
I (NAME) PER TELEPHONE
CONVERSATION WITH
YADER CASCO.

12/31/14

Office Use Only:



000267699840

12/30/14--01026--012 **78.75

FILED
14 DEC 30 AM 11:35
TALLAHASSEE, FLORIDA

12/31/14

COVER LETTER

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

SUBJECT: **O'Neill Towing**

(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: **Yader Casco**

Name (Printed or typed)

2447 Cleveland Street

Address

Hollywood Florida 33020

City, State & Zip

954-200-3617

Daytime Telephone number

yadercasco@hotmail.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: O'Neill Towing, Corp.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

2447 Cleveland Street

Hollywood Florida 33020

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: tow vehicles within the state of Florida

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Yader Casco

Name and Title: P S T

Address 2447 Cleveland Street

Address: _____

Hollywood, Fl 33020

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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CLERK OF DISTRICT COURT
JACKSONVILLE, FLORIDA

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: Jose Casco

Address: 2447 Cleveland Street

Hollywood Florida 33020

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

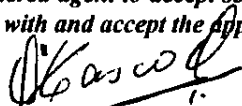
Name: Yader Casco

Address: 2447 Cleveland Street

Hollywood Florida 33020

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14 DEC 30 AM 11:35
TALLAHASSEE, FLORIDA

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

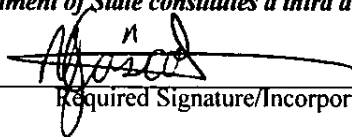


Required Signature/Registered Agent

12-19-14

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

12-19-14

Date