

P1500000041833

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

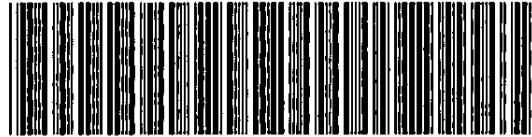
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200267503962

12/22/14--01006--022 **78.75

FILED
15 JAN 16 PM 3:59
CLERK OF STATE
TALLAHASSEE FLORIDA

1114-76016

MD 162

COVER LETTER

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

SUBJECT: PROLINERS 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
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: PROLINERS INC
Name (Printed or typed)

1845 N.W. 112 Ave, #186
Address

MIAMI FL 33172
City, State & Zip

786-208-5933
Daytime Telephone number

SKAGGym@earthlink.net
E-mail address: (to be used for future annual report notification)

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 23, 2014

PROLINERS INC.
1845 N.W. 112TH AVE., #186
MIAMI, FL 33172

SUBJECT: PROLINERS INC.
Ref. Number: W14000076016

We have received your document for PROLINERS 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):

You must list at least one incorporator with a complete business street address.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

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.

Maryanne Dickey
Regulatory Specialist II
New Filing Section

Letter Number: 014A00027121

FILED
15 JAN 16 PM 3:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION
FOR
PROLINERS INC

The undersigned subscriber(s) to these Articles of Incorporation, natural persons(s) competent to contract, hereby form a corporation under the laws of the United States and the State of Florida.

ARTICLE I – DURATION

The name of the corporation is PROLINERS INC.

ARTICLE II – DURATION

The corporation shall exist perpetually, unless dissolved according to the Laws of the United States and the State of Florida.

ARTICLE III – PURPOSE

The corporation is organized for the purpose of engaging in the activities or business permitted under the laws of the United States and the State of Florida.

ARTICLE IV – CAPITAL STOCK

The corporation is authorized to issue ONE THOUSAND SHARES (1000) OF COMMON STOCK at ONE DOLLAR (\$1.00) PAR VALUE, which shall be designated "COMMON SHARES."

CORPORATE OFFICE WILL BE LOCATED AT

1845 N. W. 112TH AVENUE
Suite 186
Miami, Florida 33172

ARTICLE V INITIAL REGISTERED OFFICE AND AGENT

The name and address of the initial Registered Agent of this Corporation is:

NAME Jose Sikaffy SR.
TITLE Vice President
ADDRESS 1845 N. W. 112TH Avenue, Suite 186
Miami, Florida 33172

ARTICLE VI- INITIAL BOARD OF DIRECTORS

The corporation shall have (3) directors initially. The number of directors may be either increased or diminished from time to time by the BYE-LAWS, but shall never be less than one (1). The names and addresses of the initial director(s) of the corporation are as follows:

NAME JOSE SIKAFFY JR.
TITLE PRESIDENT/DIRECTOR
ADDRESS 1845 N. W. 112th Avenue, Suite 186
Miami, Florida 33172

NAME ELIZABETH SIKAFFY
TITLE SECRETARY
ADDRESS 1845 N.W. 112th Avenue, Suite 186
Miami, Florida 33172

NAME JOSE SIKAFFY SR.
TITLE VICE PRESIDENT/TREASURER
ADDRESS 1845 N. W. 112th Avenue, Suite 186
Miami, Florida 33172

IN WITNESS WHEREOF, the undersigned subscriber(s) have executed these Articles of Incorporation on this 3rd day of December, 2014.

Jose Sikaffy, Jr

Elizabeth Sikaffy

Jose Sikaffy, Sr

STATE OF FLORIDA)

COUNTY OF MIAMI-DADE

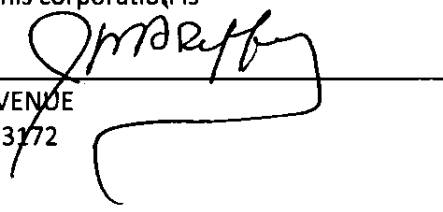
Before me a Notary Public authorized to take acknowledgements in the State and County set forth above personally appeared

15 JAN 16 PM 3:59
NOTARY PUBLIC
STATE OF FLORIDA
ALLAHADY

ARTICLE VI INCORPORATOR

The name of the incorporator for this corporation is

NAME JOSE SIKAFFY SR
ADDRESS 1845 N W 112TH AVENUE
MIAMI, FLORIDA 33172

A handwritten signature in dark ink, appearing to read 'Jose Sikaffy', is written over a horizontal line. The signature is stylized with a large, looping 'J' and a long horizontal stroke extending to the right.

FILED
15 JAN 16 PM 3:59
STATE
ATTORNEY, FLORIDA

[Signature]
[Signature]
[Signature]

FILED
15 JAN 16 PM 3:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Known to me and known to be the person(s) who executed the foregoing Articles of Incorporation, and who acknowledged to me that They executed these Articles of Incorporation.

IN WITNESS WHEREOF, I have hereunto affixed my hand and seal, in the State and County aforesaid, on this 3rd day of December 2014

(Notary Seal)

[Signature]
(Notary Public, State of Florida at Large)

My commission expires 1/9/2016



CERTIFICATE AND ACKNOWLEDGEMENT OF REGISTERED AGENT

Pursuant to Florida Statutes 48.091 and 607.034, the following is submitted:

The above corporation, desiring to organize under the laws of the State of Florida with its registered offices as indicated in the Articles of Incorporation at


1845 S. W. 112th Avenue, Suite 186
Miami, Florida 33172

Has named Jose Sikaffy, SR

located at the aforesaid address, as its Registered Agent to accept service of process within this State.

ACKNOWLEDGEMENT

Having been named to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept to act in this capacity, and agree to comply with the provisions of the Florida Law in keeping open said office.



Registered Agent

15 JAN 16 PM 3:59
CLERK OF THE COURT
JANUARY 11 STATE
AND JUDICIAL OFFICE
TALLAHASSEE, FLORIDA