

P15 0000 13027

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

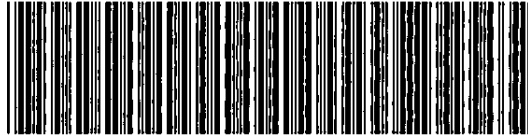
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2015 FEB -2 AM 9:43  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*8002*

*2/1/15*

## COVER LETTER

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

SUBJECT: **KEVINS AUTO DETAILING 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: **KEVIN J. BOYLE**

Name (Printed or typed)

**2625 MERCER AVE**

Address

**WEST PALM BEACH, FL 33401**

City, State & Zip

**561-644-9485**

Daytime Telephone number

**JANETKEARNSEA@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:

**KEVINS AUTO DETAILING INC.**

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

**2625 MERCER AVE.**

**WEST PALM BEACH, FL 33401**

Mailing address, if different is:

**2625 MERCER AVE.**

**WEST PALM BEACH, FL 33401**

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

**ANY AND ALL**

**LAWFUL BUSINESS**

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**ARTICLE IV SHARES**

The number of shares of stock is:

**100**

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: **KEVIN J. BOYLE, PRESIDENT**

Address: **379 LEIGH ROAD**  
**WEST PALM BEACH, FL 33405**

Name and Title: **ANGELA C. BOYLE, VICE PRESIDENT**

Address: **379 LEIGH ROAD**  
**WEST PALM BEACH, FL 33405**

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

Address:

Name and Title:

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: KEVIN J. BOYLE

Address: 379 LEIGH ROAD

WEST PALM BEACH, FL 33405

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: KEVIN J. BOYLE

Address: 379 LEIGH ROAD

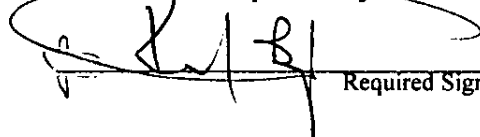
WEST PALM BEACH, FL 33405

*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

1/26/15  
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

1/26/15  
Date