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☐ PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	of Status
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Special Instructions to	Filing Officer:	

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-SECRETARY FLORID

COVER LETTER

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

SUBJECT: WHITE'S DIESEL PERFORMANCE INC.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

osed are an orig	inal and one (1) copy of the ar	ticles of incorporation and	i a check for:
\$70.00	\$78.75	□ \$78.75	□ \$87.50
Filing Fee	Filing Fee	Filing Fee	Filing Fee,
	& Certificate of Status	& Certified Copy	Certified Cop
			& Certificate
			Status
		ADDITIONAL COPY REQUIRE	

DM:	JAKE C. WHITE
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Name (Printed or typed)
	602 CHURCH ST
	· Address
	NOKOMIS, FL 34275
	City, State & Zip
	941-468-1710
	Daytime Telephone number
	WHITESDIESELINFO@GMAIL.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)

ricle II PR 2 CHURCI	INCIPAL OFFICE Principal street address HIST	Mailing ad	Mailing address, if different is:	
OKOMIS, F				
FICLE III PU	RPOSE TO CONI	DUCT ANY AND ALI	_ LAWFUL BUSINE	
FICLE IV SH number of shares o	ARES 100			
	ITIAL OFFICERS AND/OR DIRECTOR			
ICLE V IN	ITIAL OFFICERS AND/OR DIRECTOR le:_AKE C WHITE PRESIDENT			
ICLE V IN	TIAL OFFICERS AND/OR DIRECTOR JAKE C WHITE PRESIDENT 609 SUGARWOOD DR		A ₀ 1	
Name and Tit	ITIAL OFFICERS AND/OR DIRECTOR le:_AKE C WHITE PRESIDENT	Name and Title:	TALLA.	
Name and Tit	TIAL OFFICERS AND/OR DIRECTOR JAKE C WHITE PRESIDENT 609 SUGARWOOD DR	Name and Title:	AR	
Name and Tit Address	TIAL OFFICERS AND/OR DIRECTOR JAKE C WHITE PRESIDENT 609 SUGARWOOD DR	Name and Title: Address:	MAR -9 A	
Name and Tit Address	JAKE C WHITE PRESIDENT 609 SUGARWOOD DR VENICE, FL 34292	Name and Title: Address: Name and Title:	MAR -9	
Name and Tit Address Name and Title	JAKE C WHITE PRESIDENT 609 SUGARWOOD DR VENICE, FL 34292	Name and Title: Address: Name and Title:	MAR -9 AM	
Name and Tit Address Name and Titl Address	TITAL OFFICERS AND/OR DIRECTOR JAKE C WHITE PRESIDENT 609 SUGARWOOD DR VENICE, FL 34292	Name and Title: Address: Name and Title: Address:	MAR -9 AM 9: 28	
Name and Tit Address Name and Titl Address	TITIAL OFFICERS AND/OR DIRECTOR Le: JAKE C WHITE PRESIDENT 609 SUGARWOOD DR VENICE, FL 34292	Name and Title: Address: Name and Title: Address: Name and Title:	MAR -9 AM 9: 28	

Name and	l Title:	Name and Title:	
Address		Address:	
	· · · · · · · · · · · · · · · · · · ·		
ARTICLE VI	REGISTERED AGENT		
The name and Flo	orida street address (P.O. Box NOT acceptable) o	of the registered agent is:	
Name:	JAKE C WHITE	_	
Address:	602 CHURCH ST	_	
	NOKOMIS, FL 34275	_	
ARTICLE VII	INCORPORATOR		
The name and ad	dress of the Incorporator is:		
Name:	JAKE C WHITE	_	
Address:	609 SUGARWOOD DR	_	
	VENICE, FL 34292	_	
Having been nam this certificate, I a	ed as registered agent to accept service of proces on familiar with and aestept the appointment as re	s for the above stated corpora gistered agent and agree to act	tion at the place designated in in this capacity
	Required Signature/Registered Agent	.	Date
	ument and affirm that the facts stated herein are Department of State constitutes a third degree felo		
	MMMM		02/ 2 6/2015
	Required Signature/Incorporator		Date

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SEENE LAND SHALL
TALLAR ASSECT FLORIDA