## P15000044832

(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
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SECRETARY OF STATE





## **COVER LETTER**

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

SUBJECT:	ECT: PARTS AND POWER EXPORT, INC  (PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)				
Enclosed are an orig	inal and one (1) copy of the art	ticles of incorporation and	d 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 CO	OPY REQUIRED		
FROM: P	ARTS AND POWER EXPO	ORT, INC e (Printed or typed)			
<u>778</u>	NW 156TH AVE	Address			
PE	MBROKE PINES, FL 33028				
<u>30</u> 9	5-873-4742 Daytime	Telephone number			
<u>Po</u>	werForRent@Hotmail.Com E-mail address: (to be use	ed 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) HAY 18 PM 12: 4:

ARTICLE II PRINCIPAL OFFICE	PORT, INC SECRETATION		
	ALLAPASSEE SI OPIDA		
Principal street address 778 NW 156TH AVE	Mailing address, if different is:		
PEMBROKE PINES, FL 33028	N/A		
N/A	N/A		
ARTICLE III PURPOSE	and all level devices and this is the		
The purpose for which the corporation is organized is: To transact a	any and all lawful business this is the		
general nature of this corporation			
Name and Title: VISHNU HARRIPERSAD Na	ame and Title: President		
Address 778 NW 156TH AVE Address	ddress:		
PEMBROKE PINES, FL 33028			
Name and Title: VISHNU HARRIPERSAD Na	ame and Title: Secretary		
Address 778 NW 156TH AVE Address	ddress:		
DEMBERNIER EL 22010			
PEMBROKE PINES, FL 33028	<del> </del>		
PEMBROKE PINES, FL 33028			
Name and Title: VISHNU HARRIPERSAD Na			
	ame and Title: Treasurer		



Name and	Title:	Name and Title	. 15 MAY 18 PM 12: 4:	
Address			SECRETARY OF STATE FALLAHASSEE SLORIDA	
		_	TALLAHASSEE SLOPIDA	
		-		
	EGISTERED AGENT rida street address (P.O. Box NOT acceptable) or	f the registered a	gent is:	
Name:	BASIL DALLAS	-		
Address:	18301 NW 2nd COURT	_		
	MIAMI GARDENS, FL 33169	_		
ARTICLE VII I	<u>NCORPORATOR</u>			
The name and add	<u>Iress</u> of the Incorporator is:			
Name:	VISHNU HARRIPERSAD	-		
Address:	778 NW 156TH AVE	_		
	PEMBROKE PINES, FL 33028	_		
Effective date, if of (If an effective date) days after the fili  Note: If the date if	EFFECTIVE DATE: other than the date of filing: te is listed, the date must be specific and cannot ng.) inserted in this block does not meet the applicable fective date on the Department of State's records.	t be more than	five business days prior or 90 business	
Having been nafn	ed as registered agent to accept service of process in familiar with and accept the appointment as rej	s for the above s gistered agent an	tated corporation at the place designated in ad agree to act in this capacity	
XI ()	Required Signature/Registered Agent	<u> </u>	05/14/2015 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.				
Requir	ed Signature/Incorporator	<del></del>	05/14/2015 Date	