P15000065503

(Red	questor's Name)			
(Address)				
(Add	dress)			
· (City	//State/Zip/Phone	· #)		
PICK-UP	WAIT	MAIL		
(Bus	siness Entity Nam	ne)		
(Document Number)				
Certified Copies	Certificates	of Status		
Special Instructions to Filing Officer:				
P				

Office Use Only



400275608424

08/09/15--01018--010 **78.75

15 AUG -3 PM & 21

T. Burch Alle 5,2015

COVER LETTÉR

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

SUBJECT:	Pure Tek A (PROPOSED CORPORA	ir Corp.	II DO CUIDINA
	(PROPOSED CORPORA	TTE NAME – <u>MUST INCL</u>	<u>ude suffix</u>)
Enclosed are an orig	inal and one (1) copy of the art	icles 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	PY REQUIRED
FROM:	Alexander Bor	• • •	
	321 NE 2311		
	Boynton Beach	<i>FL 33435</i> State & Zip	
	56/ -3/ Daytime T	3-7476 Telephone number	
	E-mail address: (to be use	11a1a) ao 1.Com d 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 NAM The name of the corp	ME poration shall be: Pure Tel	KAIC C	ος ρ.	
ARTICLE II PRI			•	ss, if different is:
321 NE	23rd Ave			
Boynton	Beach, FC 33435	-		· · · · · · · · · · · · · · · · · · ·
	th the corporation is organized is:			
Serv	ice repair, sa	les, ins	tallations	
				2.23
· · · · · · · · · · · · · · · · · · ·		 		
MARKET AND ADDRESS OF THE PARTY				The state of the s
	The state of the s			79 3 m
ARTICLE IV SHA	ARES of stock is: 000			TOWN STATE
ARTICLE V INI	TIAL OFFICERS AND/OR DIRECTO	ORS		>
	itle: Alexander Bonilla		and Title:	
Address	321 NE 2319 Ave			
	Boynton Boh FL 3	3436		
		· · · · · · · · · · · · · · · · · · ·	***************************************	
Name and Ti	ile: Donald Castellon V	Pres Name	and Title:	
Address	320 Kenilwath		ss:	
	West Palm Bah. F.	33407		
	Tyrone A. Ascet	······································		
Name and Ti	tle: Acost			······································
Address		Pres. Addres	ss:	
	887 W. Cotton B	,		
	Apt 215 West Palm Boh, Fi			

Address	Address:	
ARTICI EVI	EGISTERED AGENT	
	rida street address (P.O. Box NOT acceptable) of the registered agen	t is:
Name:	Alexander Bonilla	
Address:	321 NE 33ra Ave	
	Boynton Bul Fe 33435	The state of the s
ARTICLE VII I	NCORPORATOR	The State of the S
The name and add	<u>tress</u> of the Incorporator is:	
Name:	Alexander Bonilla	
Address:	321 NE 23th Ave	2
	Boynton Beh, F. 33435	÷
ARTICLE VIII	EFFECTIVE DATE:	
	ther than the date of filing: <u>July 28, 2015</u> . (OPT ite is listed, the date must be specific and cannot be more than fiveng.)	
	inserted in this block does not meet the applicable statutory filing requestive date on the Department of State's records.	tirements, this date will not be listed as
	ed as registered agent to accept service of process for the above state m familiar with and accept the appointment as registered agent and a	
		7/20/18
	Required Signature/Registered Agent	/_/(///.)
I submit this docu	ment and affirm that the facts stated herein are true. I am aware ti	hat the false information submitted in a
document to the D	epartment of State constitutes a third degree felony as provided for in	s.817.155, F.S.
	distribution of the second of	7/45/15
Require	ed Signature/Incorporator	Date

Name and Title:______ Name and Title:_____