

PL00031842

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

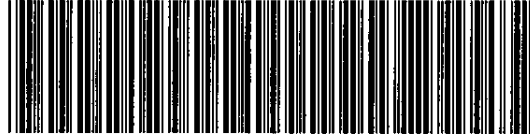
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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04/05/16--01004--002 **70.00

16 APR -5 PM 2:09

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

M, M

SS PAINTING SERVICES, INC
12226 W SAMPLE RD
CORAL SPRINGS FL 33065-4223
954-899-2676

March 31st, 2016

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
CORPORATE FILINGS
PO BOX 6327
TALLAHASSEE, FL 32314

Ref: Filing fee and Articles of new corporation SS Painting Services, Inc

Dear Department of State,

I own the company name SS Painting Services, Inc document number P13000047662 this name and company are currently inactive with the Florida Department of State Division of Corporations, I understand that the name will be available on September of this year, but with this letter I would like to certify that: I will NOT be reinstating the name and would like to request that it becomes available so you can process the attached Articles of Incorporation under the same name.

If you have any questions do not hesitate to call me at the number above.

Cordially,



Santiago Saltos
Incorporator

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SEC. OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: SS PAINTING SERVICES, 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: SANTIAGO SALTOS

Name (Printed or typed)

12226 W SAMPLE RD

Address

CORAL SPRINGS FL 33065-4223

City, State & Zip

954-899-2676

Daytime Telephone number

SANTI60@LIVE.COM

E-mail address: (to be used for future annual report notification)

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STATE
DEPT
CORP
DIVISION

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: SS PAINTING SERVICES, INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

12226 W SAMPLE RD

N/A

CORAL SPRINGS FL 33065

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: _____

ANY AND ALL LAFUL BUSINESS.

ARTICLE IV SHARES

The number of shares of stock is: 10,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: SANTIAGO SALTOS (PD)

Name and Title: _____

Address 12226 W SAMPLE RD

Address: _____

CORAL SPRINGS FL 33065

Name and Title: IRINA SAN LUCAS (VP)

Name and Title: _____

Address 12226 W SAMPLE RD

Address: _____

CORAL SPRINGS FL 33065

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: NEXT DAY TAX, INC
Address: 2457 EAST COMMERCIAL BLVD
FORT LAUDERDALE FL 33308

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: SANTIAGO SALTOS
Address: 12226 W SAMPLE RD
CORAL SPRINGS FL 33065

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TALLAHASSEE, FLORIDA


ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

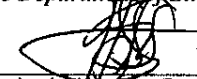


Required Signature/Registered Agent

03/31/2016

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

03/31/2016

Date