## P16000032561

(Requestor's Name)				
(Address)				
(Address)				
(Cit	ty/State/Zip/Phon	ne #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificate	s of Status		
Special Instructions to Filing Officer:				
+ alm DA	sign.			





100279118401

11/20/15--01010--017 \*\*78.75



APR 1 3 2016 D CUSHING

## **COVER LETTER**

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

SUBJECT: RO	BAINAS PAINT SOLUTIONS (PROPOSED CORPORA)	TE NAME – <u>MUST INCL</u>	ÛDE SUFFIX)		
Enclosed are an or	iginal and one (1) copy of the arti	cles of incorporation and	l 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	**************************************		
			© 8 6		
FROM: _	ERIX ROBAINAS				
Name (Printed or typed)					
7345 SW 23 STREET Address			F 100		
MIAMI, FL. 33155  City, State & Zip					
786.447.1206  Daytime Telephone number					
robainaserix@yahoo.com / E-mail address: (to be used for future annual report notification)					

NOTE: Please provide the original and one copy of the articles.



## FLORIDA DEPARTMENT OF STATE Division of Corporations

December 7, 2015

ERIX ROBAINAS 7345 SW 23 STREET MIAMI, FL 33155

SUBJECT: ROBAINAS PAINT SOLUTIONS

Ref. Number: W15000077967

We have received your document for ROBAINAS PAINT SOLUTIONS and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

The document must contain a registered agent with a Florida street address and a <u>signed</u> statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing Senior Section Administrator

Letter Number: 815A00025278



December 29, 2015

ERIX ROBAINAS 7345 SW 23 STREET MIAMI, FL 33155

SUBJECT: ROBAINAS PAINT SOLUTIONS CORP

Ref. Number: W15000077967

We have received your document for ROBAINAS PAINT SOLUTIONS CORP and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

You must complete Article VI. You can be your own registered agent but you must list your name and address in article VI and you must sign the acceptance statement.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing Senior Section Administrator

Letter Number: 515A00027085

melolard its trade liams know has sind become



March 25, 2016

ERIX ROBAINAS 7345 SW 23 STREET MIAMI, FL 33155

SUBJECT: ROBAINAS PAINT SOLUTIONS CORP

Ref. Number: W15000077967

We have received your document for ROBAINAS PAINT SOLUTIONS CORP and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The designation of the registered agent must be at a Florida street address.

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing Senior Section Administrator

Letter Number: 016A00006169

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

TICLE II P	RINCIPAL OFFICE Principal street address	Mailing:	address, if different is:	
345 SW 23 STREET		.viumig.	waning address, it different is.	
_	155	<del></del>		
RTICLE III PU	URPOSE th the corporation is organized is:			
			7 2	
e number of shares	of stock is:  NITIAL OFFICERS AND/OR DIRECT		70 TO	
e number of shares  RTICLE V II  Name and T	of stock is:  NITIAL OFFICERS AND/OR DIRECT	DENT Name and Title:		
e number of shares	of stock is:  NITIAL OFFICERS AND/OR DIRECT	DENT Name and Title:Address:		
e number of shares  RTICLE V II  Name and T  Address	of stock is:  NITIAL OFFICERS AND/OR DIRECT  Sitle: ERIX ROBAINAS/ PRESIDER  7345 SW 23 STREET	DENT Name and Title:Address:		
Name and T Address	of stock is:	DENT Name and Title:  Address:  Name and Title:  Address:	72 TO 10 TO	
Name and Ti Address  Name and Ti Address	of stock is:	DENT Name and Title:  Address: Name and Title: Address:		

Name a	nd Title:	Name and Title:
Addres	is	Address:
ARTICLE VI	REGISTERED AGENT	
i ne <u>name and i</u>	Florida street address (P.O. Box NOT acceptable	) of the registered agent is:
Name:	ERIX ROBAINAS	<del>_</del>
Address:	7345 SW 23 STREET	
	MIAMI, FL. 33155	
ARTICLE VII	INCORPORATOR	
The name and a	address of the Incorporator is:	
Name:	ERIX ROBAINAS	<u>⊆</u> , ⊂
Address:	7345 SW 23 STREET	
	MIAMI, FL. 33155	<del></del>
	med as registered agent to accept service of proc am femiliar with and accept the appointment as	ess for the above stated corporation at the place designated in registered agent and agree to act in this capacity
		04.04.2016
	Required Signature/Registered Agent	Date
I submit this do document to the	cument and affirm that the facts stated herein a Department of State constitutes a third degree fe	re true. I am aware that the false information submitted in a lony as provided for in s.817.155, F.S.
	TRIS	04.04.2016
	Required Signature/Incorporator	Date