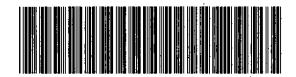
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(Re	questor's Name)			
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				

Office Use Only



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16 APR 18 PH 1: 42
SECRETARY OF STATE
SECRETARY OF STATE
AND AHASSEE FLORIDA

COVER LETTER

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

SUBJECT:	Scooler 9	shop	
	(PROPOSED CORPORA	TË NAMË – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the art	icles of incorporation and	d a check for:
	\$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:	Gidalti	Valdes (Printed or typed)	
	3321 NW	18 tenn	
		Fl. 33127 State & Zip	<u>-</u>
	305- 70	4Le-8Le 19 Celephone number	
		Tag gmail.	

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



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 4, 2016

GIDALTI VALDES 3321 NW 18 TERR MIAMI, FL 33125

SUBJECT: SCOOTER SHOP Ref. Number: W16000021342

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

Remove the (%) from the number of shares. LIST THE TOTAL NUMBER OF SHARES EXAMPLE 100. A WHOLE NUMBER.

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) 245-6052.

Neysa Culligan Regulatory Specialist II

Letter Number: 416A00005852

6 APR 18 PN 4: 4

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www.sunbiz.org

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

ARTICLE I NAME The name of the corporation	n shall be: Scooter	shop,	NC.		
<u>ARTICLE II PRINCIP</u> Pr	AL OFFICE incipal street address	Mai	ling address, if differe	nt is:	
2115 NW			21 NW 1		
ARTICLE III PURPOS	FI. 33127 corporation is organized is:	<u> </u>	ani, Fl. 3	<u>,313</u>	-7 -7-
			⊼ .	~ #	
			LAHASS	APR 18	all diseases and the second se
ARTICLE IV SHARES The number of shares of sto	ock is:	<u>60</u>	EE FLORIDA	PH I: 42	May on the state of the state o
	Gidalti Valdes (F	resident			
	1321 NW 18 tenn 1258, Fl. 33124	Address:			
-	Miami, F1. 33127				
				-	
Address		Address:			
Name and Title:		Name and Title:			
Address		Address:			
_					

Name and Title:	Name and Title:			
Address	Address:			
ARTICLE VI REGISTERED AGENT				
The <u>name and Florida street address</u> (P.O. Box NOT acceptable) of	the registered agent is:			
Name: Gidalti Valdes				
Address: 3321 NW 18 +en	AS 16			
ma. Fl. 33125	AP			
Miami, F1.3312	TASS TO THE PERSON OF THE PERS			
<u>ARTICLE VII INCORPORATOR</u>	SEE FOR			
The <u>name and address</u> of the Incorporator is:	Fos -			
Name: Scooter Shop, INC. G	idalti Valdes.			
Address: 2115 NW 12 St	• • • • • • • • • • • • • • • • • • •			
ma, A. 33125	-			
Miami, F1. 331	25			
ARTICLE VIII EFFECTIVE DATE: Effective date, if other than the date of filing: 3 10 16	(OPTIONAL)			
(If an effective date is listed, the date must be specific and cannot days after the filing.)				
Note: If the date inserted in this block does not meet the applicable the document's effective date on the Department of State's records.	statutory filing requirements, this date will not be listed as			
Having been named as registered agent to accept service of process this certificate, I am familiar with and accept the appointment as reg				
	3/10/110			
Required Signature/Registered Agent	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.				
THE	2 / 10/11			
Required Signature/Incorporator				
required Signature/meorporator	- Date			