## 0160m59806

(Requestor's Name)				
(Address)				
(Address)				
(Cil	ty/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

JUL 2 0 2016. T. SCOTT



800287668248

07/11/16--01020--017 \*\*87.50



## **COVER LETTER**

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

SUBJECT: FINESS	SE PINSTRIPING, INC.		
SCHOLET.	(PROPOSED CORPORA	ΓΕ NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	ginal 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	& Certificate of Status
		ADDITIONAL CO	PY REQUIRED
	SE A. RINCON	(Printed or typed)	
841	109TH AVE. N.		
	A	Address	
NA	PLES, FL 34108		
	City,	State & Zip	
917	7-439-0704		•
	Daytime To	elephone number	
FIN	PIN@AOL.COM		
_	E-mail address: (to be used	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 NAME The name of the corporat	ion shall be:	NC.			•
ARTICLE II PRINC 841 109TH AVE. N.	IPAL OFFICE Principal street address	. 1	Mailing address, if different is	ı:	
NAPLES, FL 34108					
					· ——
ARTICLE III PURPO The purpose for which the	DSE he corporation is organized is:	WFUL BUSINESS			
					ما المارات المارات
				- <b>a</b>	
		· · · · · · · · · · · · · · · · · · ·	<u> </u>	<u> </u>	
<del> </del>		· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·		
	,	· · · · · · · · · · · · · · · · · · ·		45. 600	
ARTICLE IV SHARE The number of shares of	ES 1000 stock is:	· ·		œ.	
	L OFFICERS AND/OR DIRECTORS				
Name and Title	JOSE A. RINCON/PRESIDENT	Name and Title	JOSE A. RINCON/TREAS	UREF	<u> </u>
Address	841 109TH AVE. N.	Address:	841 109TH AVE. N.		
	NAPLES, FL 34108	·	NAPLES, FL 34108		
		<del></del>	· · · · · · · · · · · · · · · · · · ·		
Name and Title	JOSE A. RINCON/SECRETARY	Name and Title	JOSE A. RINCON/DIRECT	ror_	
Address	841 109TH AVE. N.		841 109TH AVE. N.		
	NAPLES, FL 34108	<u> </u>	NAPLES, FL 34108		
Name and Title		Name and Title	:		
Address				····	
			<u> </u>		

ivaine a	ind Title:	Name and Title:	
Addre	SS	Address:	. `
ARTICLE VI	_REGISTERED AGENT		•
The <u>name and</u> )	Florida street address (P.O. Box NOT accepta	ble) of the registered agent is:	
Name:	JOSE A. RINCON	·	
Address:	841 109TH AVE. N.	. ·	
	NAPLES, FL 34108	· 	•
	Q.		
<u>ARTICLE VII</u>	<u>INCORPORATOR</u>		
The <u>name and a</u>	address of the Incorporator is:		
Name:	JOSE A. RINCON	·	·
Address:	841 109TH AVE. N.		
	NAPLES, FL 34108		
	EFFECTIVE DATE:		
Effective date, i (If an effective days after the f	f other than the date of filing:  date is listed, the date must be specific and filing.)	. (OPTIONAL cannot be more than five busing	_) ess days prior or 90 business
	te inserted in this block does not meet the appl effective date on the Department of State's rec		ts, this date will not be listed as
	amed as registered agent to accept service of p I am familiar with and accept the appointment		
Doyal	e Limba		7-7-16
	Required Signature/Registered Ager	nt	Date
	ocument and affirm that the facts stated herei Department of State constitutes a third degree		
Dode	2 Ruson		7-7-16
Rem	uired Signature/Incorporator		Date