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17 JUN 15 AM 10:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: BOBBY'S DETAILING CORP.

(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 ☒ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: LARRY NEWMAN
Name (Printed or typed)

6803 LAKE WORTH ROAD STE 305
Address

LAKE WORTH, FLORIDA 33467
City, State & Zip

561-642-6999
Daytime Telephone number

LBN@NEWMANADVISORS.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 corporation shall be: BOBBI'S DETAILING CORP.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

207 PARKWOOD DR. SOUTH

ROYAL PALM BEACH, FLORIDA 33411

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: MOBILE AUTO DETAILING AND ANY OTHER

BUSINESS LEGAL IN THE STATE OF FLORIDA AND UNITED STATES

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: BOBBI INSISIENGMAY, PRESIDNET

Name and Title:

Address 207 PARKWOOD DR. SOUTH

Address:

ROYAL PALM BEACH, FL 33411

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

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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: BOBBI INSISIENGMAI
Address: 207 PARKWOOD DR. SOUTH
ROYAL PALM BEACH, FL 33411

ARTICLE VII INCORPORATOR

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

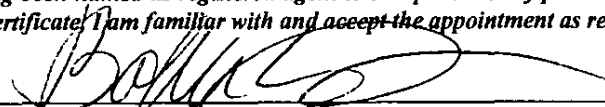
Name: BOBBI INSISIENGMAI
Address: 207 PARKWOOD DR. SOUTH
ROYAL PALM BEACH, FL 33411

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 days prior or 90 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

05/10/17

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

05/10/17

Date

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TALLAHASSEE, FLORIDA