

4/9/2018

P1846032528

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H18000112008 3)))



H180001120083ABCV

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850)617-6381

From: Account Name : CORP USA
Account Number : 072450003255
Phone : (305)634-3694
Fax Number : (305)633-9696

FILED
18 APR -9 AM 8:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
2018 APR 10 PM 2:08
DIVISION OF CORPORATIONS
BUREAU OF COMMERCIAL
INFORMATION SERVICES

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

Email Address: _____

**FLORIDA PROFIT/NON PROFIT CORPORATION
PREMIUM PARKING MANAGEMENT, INC.**

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$78.75

1846085

Please
on the day
that we
fax 4/11/18

Electronic Filing Menu Corporate Filing Menu Help

M. MOON

APR 11 2018

<https://efile.sunbiz.org/scripts/eficovr.exe>



April 10, 2018

FLORIDA DEPARTMENT OF STATE
Division of Corporations

CORP USA

SUBJECT: PREMIUM PARKING MANAGEMENT, INC.
REF: W18000033659

FILED
18 APR -9 AM 8:51
TALLAHASSEE
SECRETARY OF STATE

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The complete document was not received. Please refax the complete document, including the electronic filing cover sheet.

Please return the corrected original and one copy of 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.

Tyrone Scott
Regulatory Specialist II
New Filings Section

FAX Aud. #: H18000112008
Letter Number: 218A00007192

P.O BOX 6327 - Tallahassee, Florida 32314

4

418000112008

COVER LETTER

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

FILED
18 APR -9 AM 8:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SUBJECT: PREMIUM PARKING MANAGEMENT, 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: PAYCHX SERVICES, INC.
Name (Printed or typed)
6070 PITCH LANE
Address
BOYNTON BEACH, FLORIDA 33437
City, State & Zip
561-716-3111
Daytime Telephone number
PAULYFUN1@GMAIL.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 PREMIUM PARKING MANAGEMENT, INC.

The name of the corporation shall be: _____

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is: _____

6615 W. BOYNTON BEACH BLVD #122

BOYNTON BEACH, FLORIDA 33437

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: _____

VALET PARKING AND LOT MANAGEMENT

ARTICLE IV SHARES 1000

The number of shares of stock is: _____

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: JACK BELLINATO President Name and Title: _____

Address 6615 W. BOYNTON BEACH BLVD #122 Address: _____

BOYNTON BEACH, FLORIDA 33437

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

FILED
18 APR -9 AM 8:51
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: PAYCHX SERVICES, INC.
 Address: 6070 PITCH LANE
BOYNTON BEACH, FLORIDA 33437

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: PAYCHX SERVICES, INC.
 Address: 6070 PITCH LANE
BOYNTON BEACH, FLORIDA 33437

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

 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

 Date

FILED
 18 APR -9 AM 8:51
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

800000112008