

P18000057884

(Requestor's Name)

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☐ PICK-UP

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(Business Entity Name)

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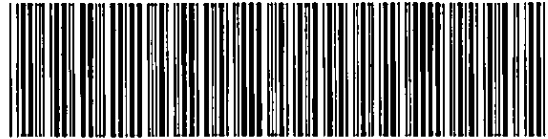
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2018 JUN 28 AM 8:48  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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## COVER LETTER

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

SUBJECT: United Sea Brother's 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      ☐ \$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: Oscar Polacios  
Name (Printed or typed)

4687 NW 42nd St.  
Address

Lauderdale Lakes FL 33319  
City, State & Zip

954-709-1052  
Daytime Telephone number

evangelistapolacios@comcast.net  
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: United Sea Brother's Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

4687 NW 42<sup>nd</sup> St.  
Lauderdale Lakes FL 33319

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any and all lawful Business

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Oscar Palacios Pres Name and Title: \_\_\_\_\_

Address: 4687 NW 42<sup>nd</sup> St. Address: \_\_\_\_\_  
Lauderdale Lakes  
FL 33319

Name and Title: Wilmer Herrera V.P. Name and Title: \_\_\_\_\_

Address: 13405 SW 282<sup>nd</sup> St. Address: \_\_\_\_\_  
Homestead FL 33033

Name and Title: Pablo Solano (secretary) Name and Title: \_\_\_\_\_

Address: 345 NW 35 St. Address: \_\_\_\_\_  
Apt. 1  
Miami FL 33127

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2018 JUN 28 AM 8:49  
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: Evangelista Palacios

Address: 4687 NW 42<sup>nd</sup> St.  
Lauderdale Lakes FL 33319

**ARTICLE VII INCORPORATOR**

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

Name: Oscar Palacios

Address: 4687 NW 42<sup>nd</sup> St.  
Lauderdale Lakes FL 33319


**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: 6/21/18 (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

6/21/18  
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

6/21/18  
Date