

P20000085882

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

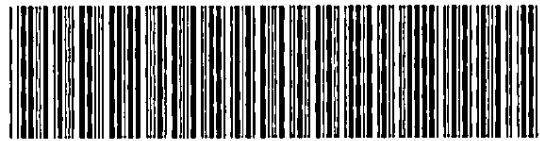
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900352852479

10/23/20--01016--011 **87.50

2020 OCT 23 AM 11:01

200
11/5/20

COVER LETTER

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

SUBJECT: Cerico Piping Component Incorporated
(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: Cerico Piping Component Incorporated
Name (Printed or typed)

10649 NW 16th Court
Address

Plantation FL 33322
City, State & Zip

(954) 306-3884
Daytime Telephone number

shelbym@aol.com
E-mail address: (to be used for future annual report notification)

2023 OCT 23 AM 11:01

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:

Cerieco Piping Component Incorporated

ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address

Mailing address, if different is:

10649 NW 16th Court

Plantation, FL 33322

- Same -

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Importer

2023 OCT 23 AM 11:01

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:

Shelby Ruebens

Name and Title:

President

Address

10649 NW 16th Court
Plantation, FL 33322

Address:

Name and Title:

Jordan Ruebens

Name and Title:

President

Address

10359 Grove Street
Cooper City FL 33328

Address:

Name and Title:

Name and Title:

Address

Address:

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: Shelby Ruebens
Address: 12649 NW 16th Court
Plantation FL 33322

ARTICLE VII INCORPORATOR

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

Name: Jordan Ruebens
Address: 10359 Grove St.
Corpus City FL 33328

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

Shelby Ruebens
Required Signature/Registered Agent

10/20/2020
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.

Jordan Ruebens
Required Signature/Incorporator

Date 10/20/2020