

P22000002443

Florida Department of State
Division of Corporations
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**FLORIDA PROFIT/NON PROFIT CORPORATION
FLY P MOBILE DETAILING & CAR WASH INC**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

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FILED**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

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ARTICLE I NAMEThe name of the corporation shall be: FLY P MOBILE DETAILING & CAR WASH INCSECRETARY OF STATE
TALLAHASSEE, FL**ARTICLE II PRINCIPAL OFFICE**Principal street address255 NE 55 STMIAMI, FL 33137

Mailing address, if different is:

255 NE 55 STMIAMI, FL 33137**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: SHARES: 100 @ \$1.00**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: PAULIN GABRIEL - P

Name and Title: _____

Address 255 NE 55 ST

Address: _____

MIAMI, FL 33137

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____
 Address _____ Address: _____

ARTICLE VI REGISTERED AGENTThe **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

Name: PAULIN GABRIEL
 Address: 255 NE 55 ST
MIAMI, FL 33137

ARTICLE VII INCORPORATORThe **name and address** of the Incorporator is:

Name: PAULIN GABRIEL
 Address: 255 NE 55 ST
MIAMI, FL 33137

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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*Paulin Gabriel, John and, 2022-01-11 16:24:44

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.Paulin Gabriel, John and, 2022-01-11 16:24:44

Required Signature/Incorporator

Date