

P220000010967

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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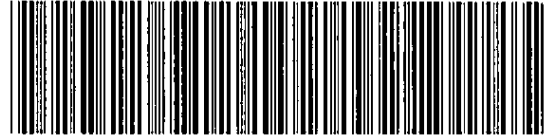
(Business Entity Name)

(Document Number)

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COVER LETTER

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

SUBJECT: XTREME Jet Ski Rentals 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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: CARLOS Quintana
Name (Printed or typed)

8175 NW 104th AV Unit 24
Address

Doral Florida 33178
City, State & Zip

786-306-9270
Daytime Telephone number

CQ031665@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

The name of the corporation shall be: XTREME JET SKI RENTALS CORP.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

8175 NW 104th AV
Unit 24
Doral FL 33178

SAME

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

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ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: CARLOS QUINTANA (P) Name and Title: CARLOS QUINTANA (V.P)

Address: 8175 NW 104th AV Address: 8175 NW 104th AV
Unit 24 Unit 24
Doral FL 33178 Doral FL 33178

Name and Title: AleJandra Quintana (SEC) Name and Title: CAROLINA QUINTANA (DIR)

Address: 8175 NW 104th AV Address: 8175 NW 104th AV
Unit 23 Unit 24
Doral FL 33178 Doral FL 33178

Name and Title: Daniel Sanchez (TRE) Name and Title: SANDRA VICCA (Dir)

Address: 8175 NW 104th AV Address: 8175 NW 104th AV
Unit 23 Unit 24
Doral FL 33178 Doral FL 33178

(SEC)
Name and Title: Alessandro Vicca Name and Title: _____
Address: 8175 NW 104th AV Address: _____
UNIT 24 _____
DORAL FL 33178 _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: CARLOS QUINTANA
Address: 8175 NW 104th AV
UNIT 24
DORAL FL 33178

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: CARLOS QUINTANA
Address: 8175 NW 104th AV
UNIT 24
DORAL FL 33178

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 03-15-2022

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 03-15-2022

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