## P24000084148

(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



900433199709

2024 AUG 23 AM 9: 47604 AUG 23 PM 2: 38

TI RECEIVED

## CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Pie in the Sky Machining Inc	 -]
Please Debit FCA000000003 For: 70	
Thank you Seth Neeley	
1	20
	Art of Inc. File 22  LTD Partnership File 25
	LTD Partnership File
	Foreign Corp. File
	L.C. File Signature File Fictitious Name File
	Fictitious Name File  Trade/Service Mark
	Trade/Service Mark
	Merger File
	Att, of Amend. File
	RA Resignation
	Dissolution / Withdrawal
	Annual Report / Reinstatement
	Cert. Copy
	Photo Copy
	Certificate of Good Standing
	Certificate of Status
	Certificate of Fictitious Name
	Corp Record Search
11-	Officer Search
	Fictitious Search
Signature	Fictitious Owner Search
	Vehicle Search
	Driving Record
Requested by:	UCC 1 or 3 File
Name Date Time	UCC 11 Search
	UCC II Retrieval
Walk-In Will Pick Up	Courier

## **COVER LETTER**

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

SUBJECT: Pie in ti	ne Sky Machining Inc		
30031.2	(PROPOSED CORPORA	VTE NAME – <u>MUST INCLU</u>	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the art	ticles of incorporation and	a check for:
■ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy	& Certificate of
		ADDITIONAL CO	PY REQUIRED
FROM: Jo	seph Katta Nam	e (Printed or typed)	
We	est Palm Beach, FL 33401		
_		Address	
We	ellington St, Florida, 1335 City	. State & Zip	
772	2-971-3317		
	Daytime	Felephone number	
jkat	ta@gmail.com		
	E-mail address: (to be use	ed for future annual report n	otification)

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)

	TPAL OFFICE		
	Principal street address	Mailing addr	ess, if different is:
1335 Wellington St		1335 Wellington St	
West Palm Beach, FL 33401		West Palm Beach, FL 33401	
ARTICLE III PURPO The purpose for which t	OSE he corporation is organized is: Any and a	ll legal business matters	
			2024 AUG
			AUG 23
ARTICLE IV SHAR The number of shares of			MY 9: 47
	L OFFICERS AND/OR DIRECTORS  Joseph Katta- President and Secretary	Name and Title:	
Address	1335 Wellington St	Address:	
	West Palm Beach, FL 33401		
Name and Title			
Address		Address:	
Name and Title		Name and Title:	-

Name	and Title:	Name and Title:	<u>-</u>
Addr	ess	Address:	
	REGISTERED AGENT  I Florida street address (P.O. Box NOT acceptable	e) of the registered agent is:	
Name:	Joseph Katta-Registered Agent		
Address:	1335 Wellington St		
	West Palm Beach, FL 33401		
ARTICLE VI	I INCORPORATOR		
The name and	laddress of the Incorporator is:		203
Name:	Joseph Katta		
Address:	1335 Wellington St	-	2024 AUC 23
	West Palm Beach, FL 33401		3 3
Effective date.	H EFFECTIVE DATE: , if other than the date of filing: ce date is listed, the date must be specific and ca		9: 47 9: 47
	ate inserted in this block does not meet the applicate is effective date on the Department of State's record		is date will not be listed as
	named as registered agent to accept service of proce m familiar with and accept the appointment as regi		
	DocuSigned by:		8/23/2024
	Respaired Signature/Registered Agent		Date
	document and affirm that the facts stated herein he Department of State constitutes a third degree for		
	Docusigned by:		8/23/2024
Required Sign	HEBBI CON TREE PROPERTY OF	Date	