

P1100002716

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

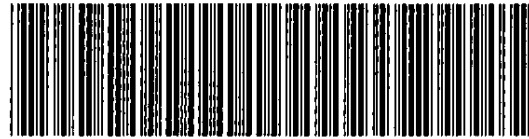
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 JUL 11 PM 2:28

Ps 7/12/11

COVER LETTER

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

SUBJECT: A & W Autobody 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 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: April Niebel

Name (Printed or typed)

4361 Okeechobee Blvd Unit A-5

Address

West Palm Beach, FL 33409

City, State & Zip

516-852-2234

Daytime Telephone number

aandwautobody@yahoo.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 A & W Autobody, Inc.
The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE
Principal street address
4361 Okeechobee Blvd, Unit A-5
West Palm Beach, FL 33409

Mailing address, if different is:
11770 Inverness Circle
Wellington, FL 33414

ARTICLE III PURPOSE
The purpose for which the corporation is organized is:
To repair the auto bodies

ARTICLE IV SHARES
The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: April Niebel, President
Address: 11770 Inverness Circle
Wellington, FL 33414

Name and Title: _____
Address: _____

Name and Title: Wilberto Lariuz, Vice President
Address: 11770 Inverness Circle
Wellington, FL 33414

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: April Niebel
Address: 11770 Inverness Circle
Wellington, FL 33414

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ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: April Niebel
Address: 11770 Inverness Circle
Wellington, FL 33414

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

[Signature]
Required Signature/Registered Agent:

07/07/2011
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.

[Signature]
Required Signature/Incorporator

07/07/2001
Date