

P120000007410

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

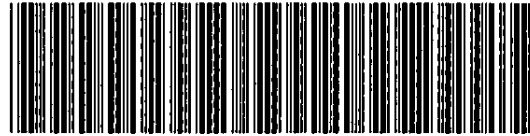
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700217371467

01/20/12--01026--010 **78.75

FILED
12 JAN 20 PM 1:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

144

COVER LETTER

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

SUBJECT: 1 Hour Cash 4 Cars 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: Perla Mazzo and Chad Webster

Name (Printed or typed)

8401 West Lake Worth Rd. Suite 215

Address

Lake Worth, FL 33449

City, State & Zip

800-714-4906

Daytime Telephone number

perla.mazzo@1hourcash4cars.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)

FILED

12 JAN 20 PM 1:49

ARTICLE I NAME 1 Hour Cash 4 Cars Inc.
The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE
Principal street address
8401 West Lake Worth Rd
Suite 215
Lake Worth, FL 33467

Mailing address, if different, is: _____
STATE OF FLORIDA
TALLAHASSEE, FLORIDA
~~V11027055-1~~

ARTICLE III PURPOSE
The purpose for which the corporation is organized is:
Purchase and re-sell automobiles within the entire united states through our network of one hundred and fifty two purchase facilities.

ARTICLE IV SHARES
The number of shares of stock is: 100,000,000

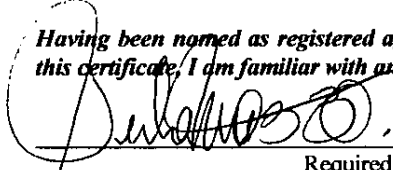
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Chad Webster- Co President	Name and Title: Perla Mazzo- Co President
Address: 4626 Lakeside Circle	Address: 5016 Ibis Court
West Palm Beach, FL 33417	Coconut Creek, FL 33073
_____	_____
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: Perla Mazzo
Address: 8401 West Lake Worth Rd ste 215
Lake Worth, FL 33467

ARTICLE VII INCORPORATOR
The name and address of the Incorporator is:
Name: Perla Mazzo
Address: 5016 Ibis Court
Coconut Creek, FL 33073

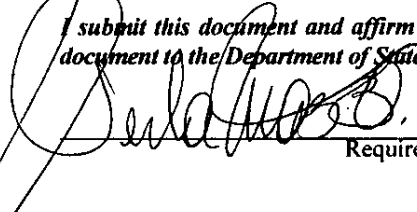
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Required Signature/Registered Agent

01.16.12
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.



Required Signature/Incorporator

01.16.12
Date