P16000012673

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





500280638115

01/27/16--01003--007 **70.00

SECRETARY OF STATE



1/4

COVER LETTER

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

SUBJECT: UNIQU	E AUTO TINT, INC.		
	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the ar	ticles of incorporation and	d a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	& Certificate of Status
		ADDITIONAL CO	DPY REQUIRED
FROM:	ELVIN CORDERO Nam E. CARROLL ST.	e (Printed or typed)	
		Address	
KIS	SSIMMEE, FL. 34744		
·	City	, State & Zip	
407	-431-7940		
	Daytime	Telephone number	
unic	jueautotintine@gmail.com		
	E-mail address: (to be use	ed for future annual report	notification)

NOTE: Please provide the original and one copy of the articles.

APPROVEL FILED

January 19, 2014

Melvin Cordero 950 E. Garroll St. - - - - -

Kissimmee, FL. 34744

16 JAN 27 AM 7: 34

SECRETARY OF STATE TALLAHASSEE FLORIDA

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL. 32314

Re: P12000066991, Unique Auto Tint, Inc.

As President of Unique Auto Tint, Inc.a Florida

Corporation Company formed August 2nd, 2012, with State of Florida document number:

P12000066991 and we are no longer tend to use this name and release the use of the name to the enclosed articles of organization. Thus we are authorizing the enclosed articles to be filed.

Cordially,

Melvin Cordero

Président



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

16 JAN 27 AM 7: 34

TICLE I NAMI e name of the corpor	UNIQUE AUTO TINT, INC.	SECRETARY OF STALLAHASSEE, FL
TICLE II PRIN DE. CARROLL ST. SSIMMEE, FL. 34	CIPAL OFFICE Principal street address	Mailing address, if different is:
TICLE III PURP	OSE the corporation is organized is:	ALL LAWFUL BUSINESS.
,		
	f stock is:	
number of shares o	f stock is:	
number of shares o TICLE V INITI Name and Tit	AL OFFICERS AND/OR DIRECTORS MELVIN CORDERO - PRESIDENT	Name and Title:
number of shares o	f stock is:	
number of shares of the shares of the shares of the share and Tite Address	AL OFFICERS AND/OR DIRECTORS Le: MELVIN CORDERO - PRESIDENT 3223 RIO GRANDE TRL KISSIMMEE, FL. 34741	Name and Title:
number of shares of the shares of the shares of the share and Tite Address	AL OFFICERS AND/OR DIRECTORS Le: MELVIN CORDERO - PRESIDENT 3223 RIO GRANDE TRL KISSIMMEE, FL. 34741	Name and Title: Address: Name and Title: Address:
number of shares of TICLE V INITI Name and Tit Address Name and Title	AL OFFICERS AND/OR DIRECTORS MELVIN CORDERO - PRESIDENT 3223 RIO GRANDE TRL KISSIMMEE, FL. 34741	Name and Title: Address: Name and Title: Address:
Name and Title Address Address	AL OFFICERS AND/OR DIRECTORS MELVIN CORDERO - PRESIDENT 3223 RIO GRANDE TRL KISSIMMEE, FL. 34741	Name and Title: Address: Name and Title: Address:



16 JAN 27 AM 7: 81 Name and Title: Name and Title: SECRETARY OF STATE Address _____ Address: ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: MELVIN CORDERO Name: 3223 RIO GRANDE TRL Address: KISSIMMEE, FL. 34741 ARTICLE VII INCORPORATOR The name and address of the Incorporator is: MELVIN CORDERO Name: 3223 RIO GRANDE TRL Address: KISSIMMEE, FL. 34741 ARTICLE VIII EFFECTIVE DATE: 1/19/2016 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 business days prior or 90 business 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 1 /19/16 Date Required Signature/Registered Agent 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. 1/19/16 Date Required Signature/Incorporator