

P16000078616

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

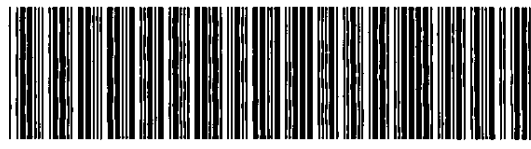
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700290102317

09/26/16--01027--002 **70.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
16 SEP 26 PM 12:13

a 09/27/16

COVER LETTER

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

SUBJECT: AUSUS VENTURES, 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

<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: COLIN J HILL
Name (Printed or typed)

4020 TOMPA RD
Address

OLDSMAR FL 34677
City, State & Zip

727-403-0817
Daytime Telephone number

HILL4003@AOL.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: AUSUS VENTURES, INC

ARTICLE II PRINCIPAL OFFICE

Principal street address
4020 TAMPA RD
OLDSMAR FL 34677

Mailing address, if different is:
—

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: CONDUCT CITRUS BUSINESS AS
AN ORGANIZED COMPANY IN THE FIELD OF ELECTRIC
CARS. SET UP DISTRIBUTORS THROUGHOUT THE U.S.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
16 SEP 26 PM 12:13

ARTICLE IV SHARES

The number of shares of stock is: 1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: COLEN HELL - OFFICER Name and Title: DAVID CROSS - DIRECTOR
Address: 4020 TAMPA RD Address: 1305 LORETTA CIRCLE
OLDSMAR FL 34677 ODESSA, FL 33556

Name and Title: NICOLE M'KENREY - DIRECTOR Name and Title: _____
Address: 3915 DEVONSHIRE DR Address: _____
DALLAS, TX 75209

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: COHEN J. HELL
Address: 4020 TAMPA RD
DUNSMAR FL 34677

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Sharon Hill
Address: 3012 Geiger Ct
Cleawater, FL 33761

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
16 SEP 26 PM 12:13


ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

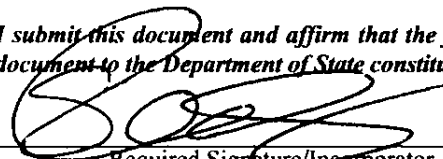
(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

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

 COHEN HELL 9-22-16
Required Signature/Registered Agent 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.

 SHARON HILL 9-22-16
Required Signature/Incorporator Date