

P12000049690

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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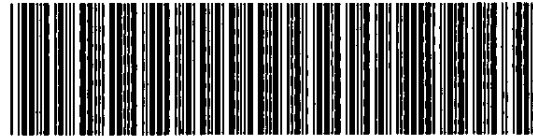
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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05/29/12--01021--014 **78.75

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 MAY 29 PM 12:35

Pg 5/30/12

COVER LETTER

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

SUBJECT: American Car Transporters, 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: Mitchell Chencin

Name (Printed or typed)

5088 NW 84th Rd.

Address

Coral Springs, FL 33067

City, State & Zip

754-368-6889

Daytime Telephone number

mchencin@gmail.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
SECRETARY OF STATE
DIVISION OF CORPORATIONS

ARTICLE I NAME

The name of the corporation shall be: American Car Transporters, Inc

12 MAY 29 PM 12:35

ARTICLE II PRINCIPAL OFFICE

Principal street address
5088 NW 84th RD
Coral Springs, FL 33067

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To Broker the transportation of vehicles through the country

ARTICLE IV SHARES

The number of shares of stock is: 100,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Mitchell Chencin
Address: 5088 NW 84th Rd
Coral Springs, FL 33067

Name and Title: President
Address: 5088 NW 84th Rd
Coral Springs, FL 33067

Name and Title: _____
Address: _____

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: Mitchell Chencin
Address: 5088 NW 84th Rd
Coral Springs, FL 33067

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Mitchell Chencin
Address: 5088 NW 84th RD
Coral Springs, FL 33067

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

5/25/12

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

5/25/12

Date