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To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : ROBERTS, SEWARD & COMPANY PA
Account Number : I20040000178
Phone : (813) 225-1040
Fax Number : (813) 221-3135

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA PROFIT/NON PROFIT CORPORATION

SUNCOAST AUTOMOTIVE ACCOUNTANTS ASSOCIATION, INC

Certificate of Status	0
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B. McKnight JAN 16 2009

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ARTICLES OF INCORPORATION
In Compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE I NAME

The name of the corporation shall be:

SUNCOAST AUTOMOTIVE ACCOUNTANTS ASSOCIATION, INC

ARTICLE II PRINCIPAL OFFICE

The principal ~~street~~ address and mailing address, if different is:

19820 US HWY 19 N
CLEARWATER, FL 33764

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

BUSINESS ASSOCIATION

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

ASSOCIATION MEMEBERS VOTE

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

List name(s), address(es) and specific title(s):

MIKE SMOLEN / PRESIDENT
6033 HAMMOCK HILL AVENUE
LITHIA, FL 33547

SHARON BORASKI / TREASURER
19820 US HWY 19 N
CLEARWATER, FL 33764

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

RICHARD A. ROBERTS
506 E. JACKSON STREET SUITE 202
TAMPA, FL 33602

ARTICLE VII INCORPORATOR

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

MIKE SMOLEN
6033 HAMMOCK HILL AVENUE
LITHIA, FL 33547

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.

Mike Smolen
Signature/Registered Agent

1-13-09
Date

X Mike Smolen
Signature/Incorporator

X 1-13-09
Date

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