

TRANSMITTAL LETTER

P00000023482

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

SUBJECT: SUNSHINE AUTO BROKERS, INC.  
(Proposed corporate name - must include suffix)

Enclosed is 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 & Certificate of Status

ADDITIONAL COPY REQUIRED

FILED  
00 FEB 29 01 4:29  
TALLAHASSEE, FL  
SECRETARY OF STATE

FROM: MICHAEL R. STEWART 700003152107--6  
Name (Printed or typed) -02/29/00--01095--011  
\*\*\*\*\*87.50 \*\*\*\*\*87.50

622 S.W. LAKE Charles Circle  
Address

St. Lucie West, FL. 34986  
City, State & Zip

561-285-6251 @ (561) 879-4931  
Daytime Telephone number

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

8/3/7

# 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:

SUNSHINE AUTO BROKERS, INC

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

622 SW LAKE Charles Circle  
St. Lucie West, Fl. 34986

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

## ARTICLE IV SHARES

The number of shares of stock is:

100

## ARTICLE V INITIAL OFFICERS/DIRECTORS

The name(s) and address(es):

MICHAEL R STEWART  
622 SW LAKE Charles Cir.  
St. Lucie West, Fl. 34986

## ARTICLE VI REGISTERED AGENT

The name and Florida street address registered agent are:

Michael R. STEWART  
622 SW Lake Charles Cir.  
St Lucie West, Fl. 34986

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator are:

Michael R. STEWART  
622 SW LAKE Charles Cir  
St. Lucie West, Fl. 34986

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Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Signature/Registered Agent

Signature/Incorporator

Date

Date

FILED

00 FEB 29 PM 4:30

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FEB 25, 2000

FEB 25, 2000