

TRANSMITTAL LETTER

Pol000098414

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

SUBJECT:

M+S Auto Reconditioning (INC)

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

800004628038--6

-10/09/01--01015--001

*****87.50 *****87.50

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,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM:

TRACY Mills + Ed Smith

Name (Printed or typed)

4570 Bacton Dr

Address

SARASOTA FL 34232

City, State & Zip

941-927-8771 - 941 321 53

Daytime Telephone number

FILED
01 OCT -9 AM 8:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

gy 10/10

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:

M & S Auto REConditioning Inc
~~Excellent Detailing~~

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

4510 Barton DR
SARASOTA FL 34232

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Detailing CAR

ARTICLE IV SHARES

The number of shares of stock is:

1000

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

PRES. TRACY mills 4510 Barton DR SARASOTA FL 34232
V-PRES Ed C Smith 4996 LABRAGAS DR SARASOTA FL 34232

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:


TRACY mills 4510 Barton DR SARASOTA FL 34232

ARTICLE VII INCORPORATOR

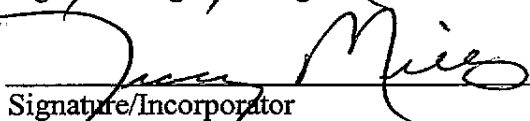
The name and address of the Incorporator is:

TRACY mills 4510 Barton DR SARASOTA FL 34232

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


Signature/Registered Agent

9-20-01
Date


Signature/Incorporator

9-20-01
Date

FILED
01 OCT -9 AM 8:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA