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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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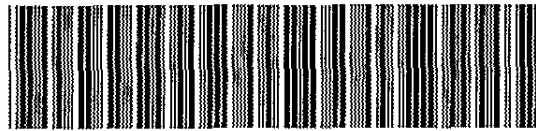
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

✓

## TRANSMITTAL LETTER

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

**SUBJECT:** Auto Pro Equipment Company  
(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:** Leonard Michael Sisco  
Name (Printed or typed)  
1130 Reserve Way Suite 104  
Address  
Naples FL 34105  
City, State & Zip  
(239) 633-6179  
Daytime Telephone number

**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:

Auto Pro Equipment Company

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

1130 Reserve Way  
Suite 104  
Naples FL 34105

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Automotive Equipment Sales & Service

### ARTICLE IV SHARES

The number of shares of stock is:

1,000 Total

### ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

Leonard Michael Sisco - President, CEO, Secretary & Treasurer  
Lisa Barbara Sisco - Vice President & Chief Operations Officer  
1130 Reserve Way, Suite 104  
Naples FL 34105  
(239) 633-6179

### ARTICLE VI REGISTERED AGENT

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

Lisa Barbara Sisco  
1130 Reserve Way, Suite 104  
Naples FL 34105

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Leonard Michael Sisco  
1130 Reserve Way, Suite 104  
Naples FL 34105

\*\*\*\*\*  
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

Lisa B. Sisco  
Signature/Registered Agent

02/10/03

Date

Leonard M. Sisco  
Signature/Incorporator

02/10/03

Date

03 FEB 12 AM 11:53  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

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