

PO3000052835

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(Business Entity Name)

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Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

David Leiser GAVE

AUTHORIZATION BY PHONE TO

CORRECT corp none

DATE 5-14-03

DOC. EXAM gj



200016973072

05/05/03--01082--012 **78.75

FILED
03 MAY -5 AM 9:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

5/14

TRANSMITTAL LETTER

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

Sales
SUBJECT: TROPICAL AUTO^U 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: DAVID LESEN
Name (Printed or typed)

2335 NW 282nd St
Address

NEW BERRY FL 32669
City, State & Zip

352-472-1308
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:

Sales
TROPICAL AUTO INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

4895W Colonial DR Orlando FL 32808

MAILING 2335 NW 282nd ST Newberry FL 32669

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Auto Dealership

ARTICLE IV SHARES

The number of shares of stock is:

1,000

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

DAVID LETSEN PRES. SEC
2335 NW 282nd ST Newberry FL 32669

ARTICLE VI REGISTERED AGENT

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

DAVID LETSEN
2335 NW 282nd ST Newberry FL 32669

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

DAVID LETSEN
2335 NW 282nd ST Newberry FL 32669

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

David Letsen PRES
Signature/Registered Agent

05-02-03
Date

David Letsen PRES
Signature/Incorporator

05-02-03
Date

FILED
MAY -5 AM 9:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA