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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

5-9-03  
28

## TRANSMITTAL LETTER

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

SUBJECT: A. Auto Sales & Repairs Inc.  
(PROPOSED CORPORATE NAME - (CORPORATION) 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: A. Auto Sales & Repairs Inc.  
Name (Printed or typed)

1391 NW 65th Terrace #19

Address

Plantation Fl. 33313

City, State & Zip

(954) 327-5632

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: A. Auto Sales & Repairs Inc.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

1391 NW 65th Terrace #19  
Plantation Fl. 33313

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Auto Sales & Repairs

**ARTICLE IV SHARES**

The number of shares of stock is:

100 Shares

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

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

Shukie Samana  
1391 NW 65th Terrace #19  
Plantation Fl. 33313

**ARTICLE VI REGISTERED AGENT**

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

Shukie Samana  
1391 NW 65th Terrace #19  
Plantation Fl. 33313

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Shukie Samana  
1391 NW 65th Terrace  
Ft. Lauderdale Fl. 33313

\*\*\*\*\*  
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

Shukie Samana  
Signature/Registered Agent

5.6.03  
Date

Shukie Samana  
Signature/Incorporator

5.6.03  
Date

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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