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(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(
(Document Number)				
Certified Copies Certificates of Status				
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03 JUN 30 AM II: 00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

7.703

TRANSMITTAL LETTER

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

SUBJECT: P	PS AUTO C	LENTER IN	CORPORATED	
	(PROPOSED CORPORATE	NAME – MUST INCLUDI	E SUFFIX)	
Enclosed is an origin	nal and one(1) copy of the articl	les of incorporation and a	check for	
Literosed is an origin	iai and ono(1) copy of the dide	co or meorporation and c	Concor for .	
\$70.00	\$78.75	\$78.75	\$87.50	
	Filing Fee	Filing Fee	Filing Fee,	
	& Certificate of Status	& Certified Copy		
			& Certificate of	
		A DEPTH ON A LOC	Status	
		ADDITIONAL COPY REQUIRED		
		FROM:		
Paps Auto CENTER INCORPORATE Name (Printed or typed)				
	Name (P	rinted or typed)	· · ·	
Z810 NW 7 AVENUE				
	P 3	8	-	
	City	BEACH, FL. State & Zip	33064	
	City,	come or exp		
	1354 >	444 (5.7.)		
	Daytime T	14 103) elephone number	···	

ARTICLES OF INCORPORATION	
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	FILED
ARTICLE I NAME	00:11 MA 06 NUL 60
The name of the corporation shall be:	SECRETARY OF STAIL
POP'S AUTO CENTER INC.	TALLAHASSEE, FLORIDA
ARTICLE II PRINCIPAL OFFICE	
The principal place of business/mailing address is:	
2810 NW 7 AVENUE PORPONO	BEACH, FL. 33064
ARTICLE III PURPOSE	
The purpose for which the corporation is organized is:	
FOR PROFIT CURPURATION	
ARTICLE IV SHARES	
The number of shares of stock is:	
1000 AT 1.00 EACH	
*	
ARTICLE V INITIAL OFFICERS/DIRECTORS (optional) The name(s) address(ss) and title(s):	
The name(s), address(es) and title(s):	
HENRY HOFFMAN: PRESIDENT	
ZOBO NE SY STREET POMPANO	BEACH FL. 33064
ARTICLE VI REGISTERED AGENT	
The name and Florida street address of the registered agent is:	
JOHN CLAYTOR	
2810 NW TAVENLE POMPANO BEXC	A, FL. 33064
ARTICLE VII INCORPORATOR	_ · · · · · · · · · · · · · · · · · · ·
The <u>name and address</u> of the Incorporator is:	
HENRY HOFFMAN	
2080 NE 54 STREET POMPANO ************************************	
Having been named as registered agent to accept service of process for the above states certificate. I am familiar with and accept the appointment as registered agent and agree	

Signature/Registered Agent