

\*  
P05000067579

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



800052966628

05/05/05--01030--013 \*\*87.50

FILED  
OFFICE OF STATE  
CORPORATIONS  
05 MAY -5 PM 3:44

B. McKnight MAY 09 2005

**TRANSMITTAL LETTER**

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

SUBJECT: COMMUNITY AUTOMOBILE RESTRAINT EDUCATION, 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: STEVEN STILLWELL  
Name (Printed or typed)

11591 SW 9th Ct  
Address

PEMBROKE PINES, FL 33025  
City, State & Zip

954 436 4834  
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:

COMMUNITY AUTOMOBILE RESTRAINT EDUCATION, INC

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

11591 SW 9 CT  
Pembroke Pines FL 33025

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

SALES & EDUCATION

## ARTICLE IV SHARES

The number of shares of stock is:

100

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

STEVEN STILLWELL, PRESIDENT  
NICOLE BUCCI-STILLWELL, VICE-PRESIDENT

## ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

STEVEN STILLWELL  
11591 SW 9 CT  
Pembroke Pines FL 33025

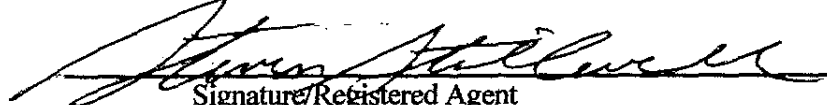
## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

STEVEN STILLWELL  
11591 SW 9 CT  
Pembroke Pines FL 33025

\*\*\*\*\*

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

2/28/05  
Date

  
Signature/Incorporator

2/28/05  
Date

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
05 MAY -5 PM 3:44