P05000123113

(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



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09/03/05--01014--004 **78.75

DIVISION OF CORPERATION OF STATE

8: 35 8

nN05-36985

TRANSMITTAL LETTER

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

SUBJECT: _	Genesis	Ayto	Repair	
	(PROPOS	ED CORPORA	TE NAME - MUST INCL	UDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

Filing Fee & Certificate of Status

Filing Fee Filing Fee,
& Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: Roberto CASTRO							
Name (Printed or typed)							
10720 SW 190 ST #32							
Address							
Miami Fla 33157							
City, State & Zip							
305-971-0788 305-484-4540							
Daytime Telephone number							

NOTE: Please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

August 25, 2005

ROBERTO CASTRO 10720 SW 190TH ST #32 MIAMI, FL 33157

SUBJECT: GENESIS I AUTO REPAIR INC.

Ref. Number: W05000036985

We have received your document for GENESIS I AUTO REPAIR INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please call this office if you are having a problem completing your articles.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6972.

Doris Brown Document Specialist New Filings Section

Letter Number: 105A00050441

E Genesis I Auto Repa	ir INC.			٠.
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is:			-	<u> </u>
10720 SW 190 ST #32 MIAMI FLA 33157				.
ARTICLE III PURPOSE The purpose for which the corporation is organized.	ed is:			
Auto moroe Repair fac	pilitie			
ARTICLE IV SHARES The number of shares of stock is:				
1 Stock Island				
ARTICLE V INITIAL OFFICERS AND List name(s), address(es) and specific title(s):	OOR DIRECTORS		•	
				·
ARTICLE VI REGISTERED AGENT				
The name and Florida street address (P.O. Box	NOT acceptable) of the	ne registered agent	is:	
Roberto CASTRO				
10931 SW 177 ST				
MIANI FLA 33157				
ARTICLE VII INCORPORATOR				
The <u>name and address</u> of the Incorporator is:		- ,		
ROBERTO CASTRO SR			•	
19931 SW 177 ST				
MIAMI FLA 33157		•.		Tr. 1

Having been named as registered agent to accept service of certificate A 4m familiar with and accept the appointment of				ea in inis
N/1 Atl		/		
Xeleuto (as 100		_ 7/2	465	
Signature/Registered Agent	;	/, [ate	
Holpen to (Maskin		7/24	05	
Signature/Incorporator		-/-// T	Date	

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTÍCLE I NAME

The name of the corporation shall be:

SECRETARY OF STATE DIVISION OF CORPORATION

05 SEP -7 AM 8: 36