

PO000028075

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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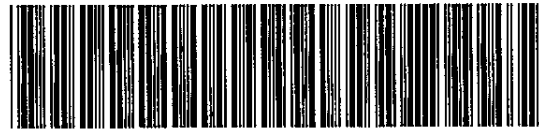
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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CLERK OF STATE
TALLAHASSEE FLORIDA

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COVER LETTER

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2006 FEB 24 PM 4:04

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

SECRETARY OF STATE
TALLAHASSEE FLORIDA

SUBJECT: Clermont Auto Works 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: Karan Wilson
Name (Printed or typed)

904 Jan Mar Ct Suite E
Address

Munneka FL 34715
City, State & Zip

352-242-0500
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: Clermont Auto Works Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

906 Jan Mar Ct Minneola FL 34715
Suite D

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Auto Repair / car whole sale business

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):

Joel Casimiro Pres, Trespure, Secretary.

ARTICLE VI REGISTERED AGENT

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

Joel Casimiro
612 W. Minneola Ave Clermont FL 34711

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Joel Casimiro
612 W. Minneola Avenue
Clermont, FL 34711

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

Joel Casimiro
Signature/Registered Agent
Joel Casimiro
Signature/Incorporator

2/17/06
Date
2/17/06
Date

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2006 FEB 24 PM 4:04
CLERK OF STATE
TALLAHASSEE FLORIDA