26000076361

Clay Anderson.				
_ 3814 Long Grove Ln				
Port Orange F1. 32129. (Address)				
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(City/Chata City/Dhana 40)				
(City/State/Zip/Phone #)				
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TRANSMITTAL LETTER

Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 414 Automotive Inc. SUBJECT: (Proposed corporate name - must include suffix) Enclosed is an original and one (1) copy of the articles of incorporation and a check for: **☑**(\$78.75 \$70.00 **\$78.75** □ \$87.50 Filing Fee Filing Fee Filing Fee Filing Fee, & Certified Copy & Certificate Certified Copy & Certificate

> FROM: Clay Anderson
> Name (Printed of typed) 3814 Long Grove Ln.
>
> Address
>
> Port Drange Pl 32129
>
> City, State & Zip 386-366-1665
>
> Daytime Telephone number

ADDITIONAL COPY REQUIRED

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



			المرابيان المالية
	Articles (of Incorporation	
1. The name of the corp	oration shall be:	414 Automotive	Q6 JUN - 1 AM 8: 08
2. The principal place of	business and mail		ion is: <u>TATAMASSEE, FLOR</u> IDA
3. The corporation shall	have the authorit	y to issue <u>/00,000</u>	shares of stock.
		is Clay Anderson Grove La	
	Arderson	member(s) whose 38/4 Long Gron Port Drange, F	ve La
The number of di		sed or lowered by amendm	nent of the bylaws of the
6. The incorporator of street address is <u>3814</u> .	this corporation Long Grove	is Clay Anderson Ln Port Ormye	whose 72129
Dated <u>5 - 29</u>	-06		

Incorporator

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and am familiar with and accept the obligations of my position as registered agent.

Dated 5-29-06

Registered Agent