

P070000009021

(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



800084710238

01/19/07--01023--027 **87.50

FILED
07 JAN 19 PM 2:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Ad

COVER LETTER

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

SUBJECT: P&M AUTO Brokers 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: PAUL Leone
Name (Printed or typed)

542 LAKE Cypress circle
Address

OKLAHOMA, FL 34677
City, State & Zip

813-679-9904
Daytime Telephone number

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

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

ARTICLE I NAME

The name of the corporation shall be:

P & M Auto Brokers, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

2424 U.S. Hwy 19
Holiday, FL 34690

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

auto sales

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):

Paul G. Leone, President

ARTICLE VI REGISTERED AGENT

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

Paul Leone
542 Lake Cypress Circle
Oldsmar, FL 34677

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Paul Leone
542 Lake Cypress Circle
Oldsmar, FL 34677

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



Signature/Incorporator

FILED
07 JAN 19 PM 2:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1/15/07

Date

1/15/07

Date