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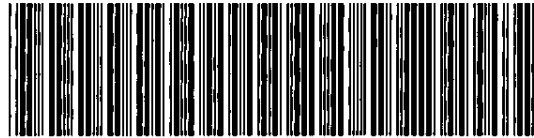
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DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

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2007 FEB -5 PM 2:33  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1 Bureh FEB 6 2007

**LAZARUS  
CORPORATE FILING SERVICE**

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**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

1. TROPICS AUTO BODY REPAIRS, INC.

(Corporation Name)

(Document #)

2.

(Corporation Name)

(Document #)

3.

(Corporation Name)

(Document #)

4.

(Corporation Name)

(Document #)

☒ Walk in

☒ Pick up time

2.00

☒ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

**NEW FILINGS**

☒ Profit

☐ Not for Profit

☐ Limited Liability

☐ Domestication

☐ Other

**AMENDMENTS**

☐ Amendment

☐ Resignation of R.A., Officer/Director

☐ Change of Registered Agent

☐ Dissolution/Withdrawal

☐ Merger

**OTHER FILINGS**

☐ Annual Report

☐ Fictitious Name

**REGISTRATION/QUALIFICATION**

☐ Foreign

☐ Limited Partnership

☐ Reinstatement

☐ Trademark

☐ Other

Examiner's Initials



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 29, 2007

LAZARUS

SUBJECT: TROPICS AUTO BODY REPAIRS, INC.  
Ref. Number: W07000004794

We have received your document for TROPICS AUTO BODY REPAIRS, 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 and street address must be consistent wherever it appears in your document.

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) 245-6928.

Tim Burch  
Document Specialist  
New Filing Section

Letter Number: 707A00006794

ARTICLE OF INCORPORATION  
OF

TROPICS AUTO BODY REPAIRS, INC.

The undersigned to these Article of Incorporation, Natural Person competent to contract to and form a corporation for profit.

ARTICLE 1-NAME

The name of the corporation is TROPICS AUTO BODY REPAIRS, INC.. The principal place of business shall be at : 2408 NW 78<sup>th</sup>, STREET,. MIAMI, FLORIDA 33147

ARTICLE 11-NATURAL OF BUSINESS

The Corporation may engage in any activities of business permitted under the laws of the United Sates and this State. These activities may include, but are not limited to the operation of the following business.

- a) To engage in the business activities of Auto Repairs, Auto trade :both buying and Selling, Rims, tires, and all other auto parts required for the proper functioning of transportation of all types. .
- b) To engage in the business of Tire Repairs and Maintenance for any person, firm, Association without restriction in this State any other State of the United State .

To conduct any and all type of business and operation, to have one or more Offices/establishment in this State and any other State of the United States.

To borrow money and conduct debt when necessary in the purchase or acquisition of real, personal and intangible property: business right or franchise; for additional working capital, in this State or for any other State of the United States.

To exercise all of the owners which are now, or may hereafter be conferred upon corporation generally by the laws of the United States and of this State.

ARTICLE 111-CAPITAL STOCK

MAXIMUM NUMBER OF SHARES OF COMMON STOCK THAT THIS CORPORATION IS authorized to have outstanding at any time is (1,000) SHARES OF COMMON STOCK, EACH HAVING A PAR VALUE OF (\$5.00) DOLLORS.

ARTICLE 1V-INITIAL CAPITAL

This amount of the initial Capital with which this corporation shall begin business is (\$50,000.00).

FILED

2007 FEB -5 PM 2: 33

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## ARTICLE V-TERMS OF EXISTENCE

This Corporation shall have perpetual existence, unless sooner dissolve by laws.

## ARTICLE VI-INITIAL REGISTERED OFFICE AND AGENT

The Street address of this corporation is 17630 NW 22 AVE, OPA LOCKA  
FLORIDA, 33056

## ARTICLE V-DIRECTORS

This corporation shall have (2) DIRECTORS Initial whose name and street  
address is as follows:

NAME	ADDRESS
ELROY SIMMONDS PRESIDENT/TREASURER	17630 NW 22 <sup>nd</sup> Ave. OPA LOCKA, FL. 33056
KESLEY SIMMONDS V/PRESIDENT/TREASURER	17630 NW 22 <sup>nd</sup> Ave. OPA LOCKA, FL. 33056

## ARTICLE V111-SUBSCRIBERS

The name and address of the subscribers to these Article of Incorporation and the  
number of shares of the \$5.00 par value common stock which they agree to take is  
as follows:

NAME	SHARES	ADDRESS
ELROY SIMMONDS PRESIDENT/TREASURER	50%	17630 NW 22 <sup>nd</sup> Ave. OPA LOCKA, FL. 33056
KESLEY SIMMONDS VICE PRESIDNT/SECRETARY	50%	17630 NW 22 <sup>nd</sup> Ave. OPA LOCK, FL. 33056

IN WITNESS WHEREOF, I have hereunto set my hand and seal, acknowledge  
and filled the foregoing Article of Incorporation under the laws of the State of  
Florida this \_\_\_\_\_ day of \_\_\_\_\_ 2006

  
ELROY SIMMONDS  
PRESIDENT/TREASURER

  
KESLEY SIMMONDS  
VICE PRESIDENT/ SECRETARY

STATE OF FLORIDA)  
AS)  
COUNTY OF BROWARD)

BEFORE ME, personally appear ELROY SIMMONDS & KESLEY SIMMONDS to me well known and known to be the individual describes in and who execute the foregoing Article of Incorporation, and acknowledge before me that execute the same for the purpose therein expressed.

WITNESS MY, hand and official seal in the County of the State named above  
This \_\_\_\_\_ day \_\_\_\_\_ 2006.

\_\_\_\_\_  
Notary public, State of Florida  
AT Large.

MY COMMISSION EXPIRES: \_\_\_\_\_

**CERTIFICATION OF DESIGNATION  
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of section 607.0501, Florida Statutes, the undersigned Corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

First that \_\_\_\_\_ ELROY SIMMONDS \_\_\_\_\_  
Desiring to organize ~~up~~ under the laws of the State \_\_\_\_\_ Florida \_\_\_\_\_

With its principal office, as indicated in the article of Incorporation has \_\_\_\_\_

Named \_\_\_\_\_ TROPICS AUTO BODY REPAIRS, INC. \_\_\_\_\_

Located at \_\_\_\_\_ 17630 NW 22<sup>nd</sup> Ave \_\_\_\_\_

City of \_\_\_\_\_ OPA LOCKA \_\_\_\_\_

County of \_\_\_\_\_ Dade \_\_\_\_\_

State of \_\_\_\_\_ Florida \_\_\_\_\_

As its agent to accept service of process within this State.

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CRPORATION AT THE PLACE DESIGNATED IN THE THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY, IFURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUE RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

Signature: \_\_\_\_\_

ELROY SIMMONDS Registered Agent