

PO7000018906

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

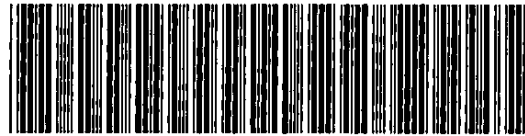
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300087746783

02/09/07--01019--018 **87.50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2007 FEB -9 PM 2:39

FILED

C.S. 2-12

COVER LETTER

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

SUBJECT: ALL STAR AUTO REPAIR COMPNY 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: MATTHEW BAPTY

Name (Printed or typed)

3320 SW 40 AVENUE, WEST PARK, FL 33023

Address

City, State & Zip

954-893-1110

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:

ALL STAR AUTO REPAIR COMPANY INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

14915 NW 22 COURT, OPA LOCKA, FL 33054

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ALL LAWFUL 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):

ANGELA SIMMONDS, 5955 NW 27 PLACE, SUNRISE, FL 33313; DIRECTOR & PRESIDENT

CURTIS MAYNARD, 830 NE 212 TERRACE, UNIT 2, MIAMI, FL 33179; VICE PRESIDENT

ARTICLE VI REGISTERED AGENT

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

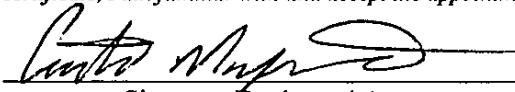
CURTIS MAYNARD, 14915 NW 22 COURT, OPA LOCKA, FL 33054

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

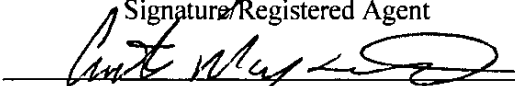
CURTIS MAYNARD, 830 NE 212 TERRACE, UNIT 2, MIAMI, FL 33179

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

1/24/07
Date



Signature/Incorporator

1/24/07
Date

FILED
2007 FEB -9 PM 2:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA