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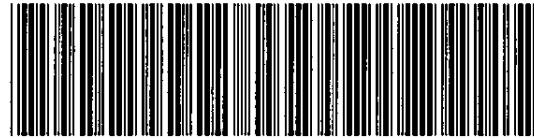
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MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____



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TALLAHASSEE, FLORIDA

5/9

**LAZARUS
CORPORATE FILING SERVICE**

3320 SW 87TH AVENUE

MIAMI, FL 33165 (305) 552-5973

Office Use Only

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

1. VEROMOTO AUTO REPAIR INC.
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

☒ Walk in ☒ Pick up time 2.06 ☒ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS

☒ Profit
☐ Not for Profit
☐ Limited Liability
☐ Domestication
☐ Other

OTHER FILINGS

☐ Annual Report
☐ Fictitious Name

AMENDMENTS

☐ Amendment
☐ Resignation of R.A., Officer/Director
☐ Change of Registered Agent
☐ Dissolution/Withdrawal
☐ Merger

REGISTRATION/QUALIFICATION

☐ Foreign
☐ Limited Partnership
☐ Reinstatement
☐ Trademark
☐ Other

Examiner's Initials

ARTICLES OF INCORPORATION

The undersigned incorporate(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I

NAME

The name of the corporation shall be:

VEROMOTO AUTO REPAIR INC

ARTICLE II

PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

13985 NW 19TH AVE
OPALOCKA FL 33054

ARTICLE III

SHARES

The number of shares, which the corporation is authorized to issue and have outstanding at any time, is 100 shares of common stock, and which common stock shall have a par of \$1.00 (one dollar) per share. All stock is to be issued fully paid and exempt from assessment.

ARTICLE IV

INITIAL REGISTERED AGENT AND STREET ADDRESS

In pursuance of Chapter 607.34 Florida Statutes, the following is submitted, in compliance with said:

First That **VEROMOTO AUTO REPAIR INC** Desiring to organize under the laws of the State Florida with its principal office as indicated in the articles of incorporation at City of MIAMI County of MIAMI-DADE State of Florida had name **GLORIA VERONICA RODRIGUEZ** of 13985 NW 19TH AVE OPALOCKA FL 33054 its agent to accept service of process within this state. Having been named to accept service of process for the above state corporation, at place designated in this certificate. I hereby accept to act in this capacity, and agree to comply with the provisions of said Act relative to keeping open said office.

By: 
GLORIA VERONICA RODRIGUEZ
Registered Agent

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE V

INCORPORATOR(S)

The name(s) and street address of the incorporate(s) to these Articles of Incorporation is (are):

GLORIA VERONICA RODRIGUEZ	100 % SHARES	13985 NW 19 TH AVE OPALOCKA FL 33054
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VI

DIRECTOR(S)

The name(s) and street address of the director(s) to these Articles of Incorporation is (are):

GLORIA VERONICA RODRIGUEZ	P/D/ S	13985 NW 19 TH AVE OPALOCKA FL 33054
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TALLAHASSEE, FLORIDA

The undersigned incorporate(s) has (have) executed these Articles of Incorporation this 3
Day of May 2007.


SIGNATURE