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(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Do	cument Number)	<u> </u>
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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07 AUG -2 AM 9: 42 SECRETARY OF STATE TALLAHASSEE ESTATE



COVER LETTER

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

SUBJECT: Alliance Automotive Inc. (PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX) Enclosed are an original and one (1) copy of the articles of incorporation and a check for:	
Filing Fee Filing Fee & Filing Fee, & Certificate of Status & Certified Copy & Certificate Status] \$78.75
FROM: James Stanley Mcclelland	
Name (Printed or typed)	d or typed)
216 Alston Dr. Address	
Orlando, FL 32835 City, State & Zip	è Zip
407 574-9935 Daytime Telephone number	ne 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:

Alliance Automotive Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

216 Alston Dr. Orlando, FL 32835

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any and 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):

James Stanley Mcclelland 216 Alston Dr. Orlando, FL 32835 President

ARTICLE VI REGISTERED AGENT

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

James Stanley Mcclelland 216 Alston Dr. Orlando FL 32835

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

James Mcclellan

James Stanley Mcclelland 216 Alston Dr. Orlando FL 32835

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 James Meclelland
Signature/Incorporator

07/31/2007

Date

07/31/2007

Date

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SECRETARY OF STATE
TALLAHASSEE FI ORIO