

P07000105848

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

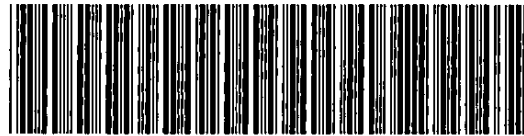
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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07 SEP 20 AM 8:45

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

KS

9/25/07

## COVER LETTER

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

SUBJECT: MOTORCYCLE  
MOTORCYCLE REPAIR CENTER 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: MICHAEL J. LEVIN

Name (Printed or typed)

12948B S.W. 87TH AVENUE

Address

MIAMI, FL 33176

City, State & Zip

305-238-0005

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:

Motorcycle Repair Center Inc.

## **ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

12948B S.W. 87th Avenue  
Miami, FL 33176

## **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:

1000

## **ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

List name(s), address(es) and specific title(s):

MICHAEL J. LEVIN - PRESIDENT  
12948B SW 87TH AVENUE  
MIAMI, FL 33176

## **ARTICLE VI REGISTERED AGENT**

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

MICHAEL J. LEVIN  
12948B SW 87TH AVENUE  
MIAMI, FL 33176

## **ARTICLE VII INCORPORATOR**

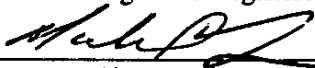
The name and address of the Incorporator is:

MICHAEL J. LEVIN  
12948B SW 87TH AVENUE  
MIAMI, FL 33176

\*\*\*\*\*  
*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 SEP 20 AM 8:45

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

9/17/07

Date

9/17/07

Date