

FD 80000095/52

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

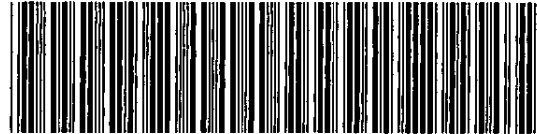
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Special Instructions to Filing Officer:

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10/09/08--01023--018 **78.75

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08 OCT 20 PM 3:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1/4

COVER LETTER

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

SUBJECT: AUTO EMPORIUM OF LAKE CITY 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: JONATHAN L. WARD SR.
Name (Printed or typed)

515 NW. LONA LOOP
Address

LAKE CITY, FLORIDA 32055
City, State & Zip

(386) 755-6444
Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 9, 2008

JONATHAN L. WARD SR.
515 NW LONA LOOP
LAKE CITY, FL 32055

SUBJECT: AUTO EMPORIUM OF LAKE CITY INC.
Ref. Number: W08000046654

We have received your document for AUTO EMPORIUM OF LAKE CITY 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):

You must list the corporation's principal street address and/or a mailing address in the document. A post office box is not acceptable for the principal address.

Please return the corrected 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) 245-6962.

Valerie Herring
Regulatory Specialist II
New Filing Section

Letter Number: 408A00053261

AUTO EMPORIUM OF LAKE CITY INC.

80-0269672

ATX1

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:

AUTO EMPORIUM OF LAKE CITY INC.

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

1832 S.W. Main Blvd
P.O. BOX 1927
LAKE CITY, FL 32056-1927
Lake City, Fl. 32025

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

STARTING NEW S. CORPORATION

ARTICLE IV SHARES

The number of shares of stock is:

10

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

JONATHAN L. WARD SR. PRESIDENT
515 NW. LONA LOOP LAKE CITY, FL. 32055
GERALYN WARD VICE PRESIDENT
515 NW. LONA LOOP
LAKE CITY, FL. 32055

ARTICLE VI REGISTERED AGENT

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

JONATHAN L. WARD SR.
515 NW. LONA LOOP
LAKE CITY
FLORIDA 32055

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

JONATHAN L. WARD SR.
515 NW. LONA LOOP
LAKE CITY, FL. 32055

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

Jonathan L. Ward Sr.
Signature/Registered Agent

10/07/08
Date

Jonathan L. Ward Sr.
Signature/Incorporator

10/07/08
Date