P08880102887

;				
(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



300138030333

11/19/09--01006--003 **78.75

NOW 19 P 4:51

A CANALINA

COVER LETTER

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

SUBJECT: AFTERMARKET SOLUTIONS of NORTH AMERICA, Inc.
(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

Enclosed are an orig	inal and one (1) copy of the artic	cles of incorporation and	l a check for:
\$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	☑ \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED
FROM: <u>Mi</u>	chael Ely Name	(Printed or typed)	h., h.,
1010 Forest Circle Address			
	Winter Springs, FL 32708 City,	State & Zip	
	407 695-4317 Daytime T	elephone 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:

AFTERMARKET SOLUTIONS of NORTH AMERICA, INC.

ARTICLE II PRINCIPAL OFFICE

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

1010 Forest Circle, Winter Springs, FL 32708



The purpose for which the corporation is organized is:

This corporation is organized for the purpose of transacting any and all lawful business.

ARTICLE IV SHARES

The number of shares of stock is:

This corporation is authorized to issue 100 shares of \$10.00 par value common stock, which shall be designated common stock.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

The following individuals shall initially serve as directors:

Michael Ely

Lisa Ely

1010 Forest Circle

1010 Forest Circle

Winter Springs, FL 32708

Winter Springs, FL 32708

President

Secretary

ARTICLE VI REGISTERED AGENT

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

Michael Ely

1010 Forest Circle

Winter Springs, FL 32708

Michael Ely - Registered Agent

11-17-0

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Michael Ely

1010 Forest Circle

Winter Springs, FL 32708

Michael Ely - Incorporator

Date

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

11-17-2008

Date

<u> 11-17-2008</u>

Date