

PO 9000019137

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

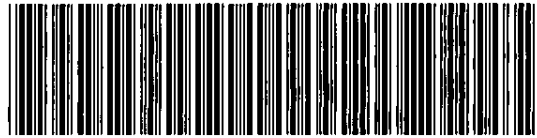
(Business Entity Name)

(Document Number)

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

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## COVER LETTER

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

**SUBJECT:** ONE STOP CAR CARE OF SEMINOLE CORP.  
(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      ☒ \$78.75  
Filing Fee      Filing Fee  
                    & Certificate of Status

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
<b>ADDITIONAL COPY REQUIRED</b>	

**FROM:** HECTOR E GONZALEZ  
Name (Printed or typed)

500 W AIRPORT BLVD.#1304 VILLAGE LAKES  
Address

SANFORD,FL.32773  
City, State & Zip

407-968-2222  
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:

ONE STOP CAR CARE OF SEMINOLE CORP.

### ARTICLE II PRINCIPAL OFFICE

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

500 W.AIRPORT BLVD.VILLAGE LAKES,#1304  
SANFORD,FL.32773

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

### ARTICLE IV SHARES

The number of shares of stock is:

1000 OF \$1.00 VALUE

### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

HECTOR E GONZALEZ  
500 W.AIRPORT BLVD.VILLAGE LAKES,#1304  
SANFORD,FL.32773

### ARTICLE VI REGISTERED AGENT

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

HECTOR E GONZALEZ  
500 W AIRPORT BLVD.VILLAGE LAKES #1304  
SANFORD,FL.32773

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

HECTOR E.GONZALEZ  
500 W.AIRPORT BLVD.VILLAGE LAKES,#1304  
SANFORD,FL.32773

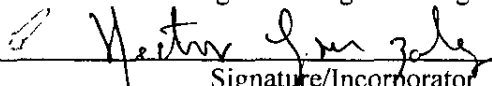
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Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

  
\_\_\_\_\_  
Signature/Registered Agent

02/23/2009

\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

02/23/2009

\_\_\_\_\_  
Date

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