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FILED 2009 AUG 10 P 2: 41 SECRETARY OF STATE

AUG 11 2009 D. A. WHITE

COVER LETTER

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

SUBJECT:	BAYWAY AUTOMOTIVE OF PORT RICHEY, INC.			
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)	
Enclosed are an orig	inal and one (1) copy of the arti	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	☑ \$87.50 Filing Fee, Certified Copy & Certificate of Status	
		ADDITIONAL CO	OPY REQUIRED	
FROM:		A A. SVEHLA (Printed or typed)		
		FTON LANE		
	F	Address		
	PORT RICHEY, FL 34668			
	City,	State & Zip		
	727-842-4718			
	Daytime T	elephone number	, ,	
		@TAMPABAY.RR.CC		
	E-mail address: (to be used for future annual report notification)			

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:

BAYWAY AUTOMOTIVE OF PORT RICHEY, INC.

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is: 8410 AFTON LANE, PORT RICHEY, FL 34668

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: AUTOMOTIVE REPAIRS AND SERVICES

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):

PRESIDENT / VICE PRESIDENT / SECRETARY / TREASURER VIRGINIA A. SVEHLA, 8410 AFTON LANE, PORT RICHEY, FL. 34668

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: ROBERT J. SCHWARTZ, P.A. 13125 HICKS ROAD HUDSON, FL 34669-3814

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is: VIRGINIA A. SVEHLA 8410 AFTON LANE PORT RICHEY, FL 34668

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

ON ROBERT 5 SCHWART