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(Requestor's Name)				
(Address)				
(Address)				
Maga,				
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
<u> </u>	ocument Number)			
(DC	cament Namber)			
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				
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Office Use Only



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DEPAGAICA OF STATE DIVISION OF CORPORATIONS TALBABASSEE, FLORIDA

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RECEIVED

COVER LETTER

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

SUBJECT:	Auto Ex	(+ em es	Inc
	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	<u>UDE SUFFIX</u>)
Enclosed are an orig	ginal and one (1) copy of the art	icles 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	DPY REQUIRED
FROM:	Nam		
	2080 Lak	e vi'ew Po, Address	int Rd.
	Quincy FL. City	32351 , State & Zip	
	950 — 50 Daytime 1	79 – 95 // Telephone number	<u></u>
	E-mail address: (to be use	He W Yahoo.	Com notification)

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

ARTICLES OF INCORPORATION	
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 Extremes, ARTICLE II PRINCIPAL OFFICE The principal street address and mailing address, if different is:	FILE
ADDICI DI MAND	10 10
The name of the corporation shall be: Auto Extremes	The CAN S
The name of the corporation shall be. 77470 7-577 547 65,	The state of the s
	386
	T. P. O. S.
ARTICLE II PRINCIPAL OFFICE	- WIDA
3014 l'ennessee Capital	Blud. Tallahossee, FL 32303
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: 500	
300	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTOR List name(s), address(es) and specific title(s):	<u> 85</u>
Craig Millotto C. En 10	
Craig Millette CEO/President Raymond C. ConcIII Vise President	
way mond C. Concill Vise President	
ARTICLE VI REGISTERED AGENT	
The name and Florida street address (P.O. Box NOT acceptable) of	f the registered agent is:
Craig Millette	
5014 Tennessee Cap, tal Blud, Tallahassee, FL 32303.	
Tullahacces FL 32303	·.
ARTICLE VII INCORPORATOR	
The <u>name and address</u> of the Incorporator is:	
Graig Millette	
Graig Millette 2080 Lake view foist Rd.	
***************************************	*********
Having been named as registered agent to accept service of proce	ess 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	
Crail Mille	1-6-10
Signature/Registered Agent	Date
Crail (MIII)	1-6-10
Signature/Incorporator	Date