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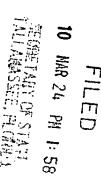
(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
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Office Use Only



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3-25-10 CA

COVER LETTER

ARISTOCRAT AUTO BROKERS CORP.

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

SUBJECT:	ARISTOCRAT AUTO BROKERS CORP.			
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u> I	UDE SUFFIX)	
Enclosed are an orig	ginal and one (1) copy of the art	icles 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 o Status	
		ADDITIONAL CO	PY REQUIRED	
FROM: Ab	oraham Sarno Nam	e (Printed or typed)	<u> </u>	
11	0 waters Edge Lane			
		Address		
Inc	lialantic, Florida 32903 City	, State & Zip		
32 ⁻	1-266-4806			
	Daytime	Telephone number	. —	
aris	tocrat01@yahoo.com			
	E-mail address: (to be use	ed for future annual report r	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:

ARISTOCRAT AUTO BROKERS CORP.

ARTICLE II PRINCIPAL OFFICE

The principal <u>street</u> address and mailing address, if different is: 110 WATERS EDGE LANE INDIALANTIC, FLORIDA 32903

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: BROKERAGE OF VEHCILES AT DEALER PREMISES

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):

ABRAHAM

110 WATERS

INDIALANTIC, P, VP, S, & T

SARNO

EDGE LANE

FLORIDA 32903

ARTICLE VI REGISTERED AGENT

The <u>name and Florida street address</u> (P.O. Box **NOT** acceptable) of the registered agent is: ABRAHAM SARNO 110 WATERS EDGE LANE

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is: ABRAHAM SARNO

110 WATERS EDGE LANE

INDIALANTIC, FLORIDA 32903

INDIALANTIC, FLORIDA 32903

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

JH 3	3/11/2010
Signature/Registered Agent	Date
M13	3/11/2010
Signature/Incorporator	Date