

P/D0000078168

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

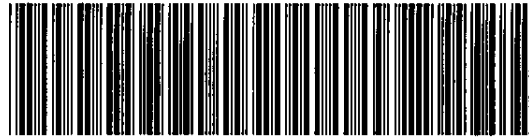
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



900185472669

09/22/10--01020--006 \*\*78.75

FILED  
10 SEP 22 PM 2:23  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

MRD 9/27

## COVER LETTER

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

**SUBJECT:** \_\_\_\_\_  
(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

☐ \$78.75      ☐ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                         & Certificate of  
                         Status

**ADDITIONAL COPY REQUIRED**

**FROM:** Atlas Parts Export, Inc.  
Name (Printed or typed)

890 SE 4 Street  
Address

Hialeah, FL 33010  
City, State & Zip

(786) 499-6163  
Daytime Telephone number

bettyrodriguezr@yahoo.com  
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:

Atlas Parts Export, Inc.

**ARTICLE II PRINCIPAL OFFICE**

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

890 SE 4 Street

Hialeah, FL 33010

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

The power to engage in any and all lawful aspects of business.

**ARTICLE IV SHARES**

The number of shares of stock is:

100 shares, per value of \$1.00 per share, all of which will be com

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

Pres.

Beatriz E.

Rodriguez

**ARTICLE VI REGISTERED AGENT**

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

Beatriz E. Rodriguez

890 SE 4 Street

Hialeah, FL 33010

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Beatriz E. Rodriguez

890 SE 4 Street

Hialeah, FL 33010

\*\*\*\*\*

*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*

*Beatriz Rodriguez*

Signature/Registered Agent

*Beatriz Rodriguez*

Signature/Incorporator

FILED

10 SEP 22 PM 2:23

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

9/20/10  
Date

9/20/10  
Date