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(Requestor's Name)

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(City/State/Zip/Phone #)

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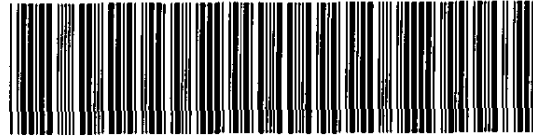
(Business Entity Name)

(Document Number)

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

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DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

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DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

W.I.  
2010

## COVER LETTER

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

SUBJECT: CAPITOL AUTO CONSULTANTS, INC  
(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  
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 COPY REQUIRED**

FROM: Philip H. Hiss  
Name (Printed or typed)

501 Bluestone Rd.  
Address

Tallahassee, FL 32301  
City, State & Zip

850-251-3865  
Daytime Telephone number

philip.hiss@gmail.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:

**Capitol Auto Consultants, Inc**

## ARTICLE II PRINCIPAL OFFICE

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

**3100 Apalachee Parkway, Tallahassee, FL 32311**

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

**To harness private interests in service to the public interest.**

## 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):

**Jitesh Kumar Kanji, 5238 Woodgate Way, Marianna, FL 32446. President.**

## ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

**Jitesh Kumar Kanji, 5238 Woodgate Way, Marianna, FL 32446**

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

**Jitesh Kumar Kanji, 5238 Woodgate Way, Marianna, FL 32446**

\*\*\*\*\*

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

9-22-10 \_\_\_\_\_  
Date

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

9-22-10 \_\_\_\_\_  
Date

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## **CERTIFICATE OF DESIGNATION**

### **REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of Section 607.0501 or 617.0501, Florida Statutes the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

- 1) The name of the corporation is:

**CAPITOL AUTO CONSULTANTS, INC**

- 2) The name and address of the registered agent and office is:

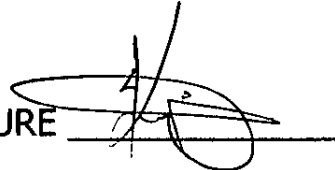
**JITESH KUMAR KANJI**

~~**3100 APALACHEE PARKWAY**~~  
~~**TALLAHASSEE, FL 32311**~~

*5238 WOODGATE WAY  
MARIANNA, FL 32446*

HAVING BEEN NAMES AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THE CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

SIGNATURE



DATE 9-22-10

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TALLAHASSEE, FLORIDA