

PI 0000103409

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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(Business Entity Name)

(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900188732749

EFFECTIVE DATE

Dec 27, 2011

12/28/10--01001--005 **78.75

RECEIVED

10 DEC 27 PM 3:12

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED

10 DEC 27 PM 3:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

W.I.
12-27-10
B

COVER LETTER

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

SUBJECT: MICHAEL'S Imports
(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: MICHAEL L FRANCIS
Name (Printed or typed)
1745 N. MONROE ST
Address
TALL FL 32303
City, State & Zip
850 251-9267
Daytime Telephone number
CARMAN Mike@Comcast.NET
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)

EFFECTIVE DATE

Jan. 01, 2011

ARTICLE I NAME

The name of the corporation shall be:

MICHAEL'S Imports INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

1745 N. MONROE ST
TALL FL 32303

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Auto SALES

ARTICLE IV SHARES

The number of shares of stock is: 1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: MICHAEL FRANCIS (OWNER)
Address: 1745 N. MONROE ST
TALL FL 32303

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: MICHAEL FRANCIS
Address: 1745 N. MONROE ST
TALL FL 32303


ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: MICHAEL FRANCIS
Address: 1745 N. MONROE ST
TALL FL 32303

f fl. Date 01-01-2011

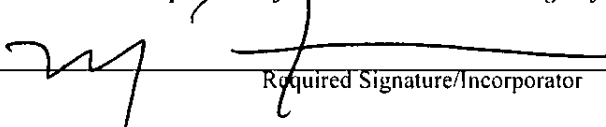
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity


Required Signature/Registered Agent

12-27-10

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.


Required Signature/Incorporator

12/27/10
Date

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA