

P11000010379

(Requestor's Name)

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DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

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11 JAN 31 AM 8:17

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

PS 4/1/11

# LAZARUS

## CORPORATE FILING SERVICE

3320 SW 87<sup>TH</sup> AVENUE

MIAMI, FL 33165 (305) 552-5973

Office Use Only

### CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. G.P. TRANSMISSION CORPORATION  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

☒ Walk in

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### NEW FILINGS

- ☒ Profit
- ☐ Not for Profit
- ☐ Limited Liability
- ☐ Domestication
- ☐ Other

### AMENDMENTS

- ☐ Amendment
- ☐ Resignation of R.A., Officer/Director
- ☐ Change of Registered Agent
- ☐ Dissolution/Withdrawal
- ☐ Merger

### OTHER FILINGS

- ☐ Annual Report
- ☐ Fictitious Name

### REGISTRATION/QUALIFICATION

- ☐ Foreign
- ☐ Limited Partnership
- ☐ Reinstatement
- ☐ Trademark
- ☐ Other

Examiner's Initials

1-27-2011

To whom it may concern:

Please be advised that the owners of the company G.Q TRANSMISSION  
CORPORATION with the document number P97000070712 are the same as those  
who are opening this new company with the same name. Thank you.

Sincerely,

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: **G.Q. TRANSMISSION CORPORATION**

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
600 NW 22ND AVE  
MIAMI  
FLORIDA 33125

Mailing address, if different is:  
600 NW 22ND AVE  
MIAMI  
FLORIDA 33125

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:  
**REPAIRS AND INSTALLATION OF AUTO TRANSMISSIONS**

**ARTICLE IV SHARES**

The number of shares of stock is: **100 SHARES @ 1.00 PER VALUE**

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

Name and Title: PRESIDENT  
Address: 600 NW 22ND AVE  
MIAMI  
FLORIDA 33125

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
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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: GABRIEL QUINTANA  
Address: 600 NW 22ND AVE  
MIAMI FL 33125

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: GABRIEL QUINTANA  
Address: 600 NW 22ND AVE  
MIAMI FL 33125

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

X Gabriel Quintana  
Required Signature/Registered Agent

01/26/2011  
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.

X Gabriel Quintana  
Required Signature/Incorporator

01/26/2011  
Date

FILED  
JAN 31 AM 8:18  
CLERK OF THE  
DEPARTMENT OF  
STATE  
TALLAHASSEE, FLORIDA