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(Requestor's Name)			
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(Address)			
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(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
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COVER LETTER

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

SUBJECT: Sam Motors Inc (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

ST0.00 Filing Fee

Filing Fee & Certificate of Status

\$78.75

\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status		
ADDITIONAL COPY REQUIRED			

FROM:	Juan A Azize		
	Name (Printed or typed)		
	2013 Haverview Ct	2011 14112	
	Address	2011 MAR	' ''-'
	Weston Florida 33326	IR - I ASSEE	
	City, State & Zip	PH	[]]
	954 822-5560		\smile
	Daytime Telephone number	57	
	jaazize@aol.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

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In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME The name of the corporation shall be: Sam Motors Inc

ARTICLE II PRINCIPAL OFFICE

Principal <u>street</u> address 2013 Haverview Ct Weston, FL 33326

Mailing address, if different is:
2013 Haverview Ct
Weston, FL 33326
•

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Auto Sales

ARTICLE IV SHARES

The number of shares of stock is: 1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Titl	le: <u>Juan A Azize, President</u>	Name and Title:	
Address:	2013 Haverview Ct	Address:	
	Weston, FL 33326		
Name and Titl	le:		
Address:			
	e:	Name and Title:	
Address:		Address:	
ARTICLE VI F	REGISTERED AGENT		
The name and Flori	ida street address (P.O. Box NOT acceptable)	of the registered agent is:	
Name:	Juan A Azize		P & II
Address:	2013 Haverview Ct		
	Westo, FL 33326		FI 2011 HAR - SESRE HAR ALLEARENARS
ARTICLE VII	NCORPORATOR		
	ess of the Incorporator is:		
Name:	Walfreddy Gomez PA		PH I:5
Address:	3450 West 84 Street Suite 202-E		
	Hialeah Gardens, FL 33018		
	t as registered agent to accept service of proce familiar with and accept the appointment as re		ct in this capacity
/ //	And		02/08/11
	Required Signature/Registered Agent		Date
I submit this docum	ent and affirm that the facts stated herein a	re true. I am aware that the j	false information submitted in a
document to the Dep	partment of State conspitutes a third/degree felo	ony as provided for in s.817.15	5, F.S.
\checkmark	H+++		
	titititit.		2/8/11
	Required Signature/Incorporator		Date
	(<u> </u>		