## P110000041187

. (Requestor's Name)		
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## **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 Filing Fee  & Certificate of Status  \$78.75 \$87.50  Filing Fee  & Certified Copy  & Certificate of Status  ADDITIONAL COPY REQUIRED		
FROM: Sam Auto Trado and Repair Name (Printed or typed)		
4912 OID Winter Garden Rd		
Orlando Fl 32811		
(321) 239 — 9039  Daytime Telephone number		
TESTAI - Mail & Jahas. Com		

NOTE: Please provide the original and one copy of the articles.



April 18, 2011

SAM AUTO TRADE AND REPAIR 9351 LAKE FISCHER BLVD GOTHA, FL 34734

SUBJECT: SAM AUTO TRADE AND REPAIR

Ref. Number: W11000012869

We have received your document for SAM AUTO TRADE AND REPAIR and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

If you have any questions concerning the filing of your document, please call (850) 245-6995.

Jessica A Fason Regulatory Specialist II

Letter Number: 511A00005517

ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit) All to Trade and Repair ING The name of the corporation shall be: PRINCIPAL OFFICE Principal street address 12 012 Winter Garden, Rd Mailing address, if different is: The purpose for which the corporation is organized is:

Sale Cars and Repuir Cars ARTICLE IV SHARES 100 (ONE HUNDRED) The number of shares of stock is: INITIAL OFFICERS AND/OR DIRECTORS (DIES IDENT) (SECRETURY) Name and Title: Address: Name and Title: Name and Title: Address: Address: Name and Title: Name and Title: Address: Address: ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Name: Address: ARTICLE VII INCORPORATOR The <u>name and address</u> of the Incorporator is: Name: Address: Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, Lam familiar with and accept the appointment as registered agent and agree to act in this capacity Required Signature/Registered Agent 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