P11000055893

(Re	equestor's Name)	
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(Ĉit	ty/State/Zip/Phon	e #)
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COVER LETTER

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

SUBJECT: CB ALLO SOLES (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 \$78.75 Filing Fee & Certificate of Status \$78.75 \$87.50 Filing Fee & Certified Copy & Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED
FROM: Mathaniel Brooks Name (Printed or typed)
2330 NW 635t Apt F
MAM F 33147 City, State & Zip
786-488-1658 Daytime Telephone number
Megabal 3816hotman.com E-mail address: (to be used for future annual report notification)

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



RECEIVED 11 JUN 13 PM 12: 4: JISTISTON OF CORPORATION

FLORIDA DEPARTMENT OF STATE Division of Corporations

June 2, 2011

NATHANIEL BROOKS 2330 NW 63 ST APT F MIAMI, FL 33147

SUBJECT: CB AUTO SALES Ref. Number: W11000030341

We have received your document for CB AUTO SALES and your check(s) totaling \$87.50. 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.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Jessica A Fason Regulatory Specialist II

Letter Number: 811A00013570

www.sunbiz.org

DO DOV COOF OF 11 1

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

The name of the cor	poration shall be: CB Auto Sale	es inc,	
ARTICLE II	PRINCIPAL OFFICE Principal street address 2330 AVW 6354 AAPP MIAMI FL 33147	Mailing address, if different is: 2330 NW 638+	
he purpose for wh	PURPOSE iich the corporation is organized is: OUY and Sale USed C	ars,	
ARTICLE IV	SHARES es of stock is:		
Name and Tit Address:	INITIAL OFFICERS AND/OR DIRECTORS IC: Northaniel Brooks CFO Name 2330 Nw 6357 APFF Addre		inag
Name and Tit Address:	10: Carolyn Smith VP Name 25451/W SALE MAMI PL 83147	e and Title: LUIS Diaz Computer to ess: 2643 NW SAVE MADMI F1 33147	ech,
Name and Tit Address:	10: Angele Daws PR Name 232/WW 2/Ave Apt D Addre MAMM FT 33/47	e and Title:	
	REGISTERED AGENT ida street address (P.O. Box NOT acceptable) of the regis	stered agent is:	
Name: Address:	2330 NW 635 APAF		
	INCORPORATOR		
he <u>name and adda</u> Name: Address:	1955 of the Incorporator is: Nathanel Brooks 2330 NW 638 Bot F MBM Ff 33147	2: L2	•
	as registered agent to accept service of process for the familiar with and accept the appointment as registered a		
	4		
	Required Signature/Registered Agent	Date	
submit this docun xument to the Dep	nent and affirm that the facts stated herein are true. I d partment of State con stitutes a third degree felony as prov	am aware that the false information submitted in a vided for in s.817.155, F.S.	
		/2-/7-/0 Date	
	Required Signature/Incorporator	Date	