

P/1000062748

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



100209661891

07/11/11--01028--004 \*\*70.00

**FILED**  
11 JUL 11 PM 4:38  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

MRS  
7/12

## COVER LETTER

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

**SUBJECT:** Gold Coast Tire of Hypoluxo Road, Inc.

(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:** Gold Coast Tire of Hypoluxo Road, Inc.

Name (Printed or typed)

4601 W. Hypoluxo Rd

Address

Lake Worth, FL 33463

City, State & Zip

954-975-0888

Daytime Telephone number

Josh@goldcoasttire.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

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

### ARTICLE I NAME

The name of the corporation shall be: Gold Coast Tire of Hypoluxo Road, Inc.

### ARTICLE II PRINCIPAL OFFICE

Principal street address  
4601 W. Hypoluxo Rd  
Lake Worth, FL 33463

Mailing address, if different is:

1509 Lyons Rd  
Coconut Creek, FL 33063

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:  
Tires Sales and Auto/Lt Truck Repair

### ARTICLE IV SHARES

The number of shares of stock is: 100

### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Lloyd Oretsky, Pres

Address: 1509 Lyons Rd  
Coconut Creek, FL 33063

Name and Title: Josh Oretsky, VP/Sec/Treas

Address: 1509 Lyons Rd  
Coconut Creek, FL 33063

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: Josh Oretsky

Address: 1509 Lyons Rd  
Coconut Creek, FL 33063


### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Josh Oretsky

Address: 1509 Lyons Rd  
Coconut Creek, FL 33063

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

7/7/2011  
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.

  
Required Signature/Incorporator

7/7/2011  
Date

FILED  
11 JUL 11 PM 4:38  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA