

? P11000064149

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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Special Instructions to Filing Officer:

Office Use Only



800202948668

07/05/11--01041--028 \*\*23.75

05/02/11--01041--005 \*\*55.00

RECEIVED  
11 JUL 14 PM 4:01  
DIVISION OF CORPORATIONS

FILED  
2011 JUL 14 PM 12:02  
SECRETARY OF STATE  
TALLAHASSEE, FL 32310

10281 JUL 18 2011



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 4, 2011

FLORIDIAN AURO, LLC  
CHARLES M. FIRESTONE  
P.O. BOX 117  
NEW SMYRNA BEACH, FL 32170

SUBJECT: FLORIDIAN AURO, LLC  
Ref. Number: 800202948668

We have received your document for FLORIDIAN AURO, LLC and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Our records show no entity by this name.

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

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) 245-6967.

Leslie Sellers  
Regulatory Specialist II

Letter Number: 011A00010937

## COVER LETTER

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

SUBJECT: **Floridian Auto 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: **Charles Morgan Firestone**

Name (Printed or typed)

**2392 Pioneer Trail**

Address

**New Smyrna Beach, FL 32168**

City, State & Zip

**386-547-0225**

Daytime Telephone number

**firestone\_charles@yahoo.com**

E-mail address: (to be used for future annual report notification)

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

FILED  
2011 JUL 14 PM 12:02  
TALLAHASSEE, FL 32314  
SECRETARY OF STATE

**ARTICLES OF INCORPORATION**

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

**ARTICLE I NAME**

Floridian Auto INC

The name of the corporation shall be:

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
2392 Pioneer Trail  
New Smyrna Beach, FL 32168

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

The Corporation shall engage in any activity or business permitted under the laws of the United States and of the State of Florida.

**ARTICLE IV SHARES**

The number of shares of stock is: 10000

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

Name and Title: Charles Morgan Firestone - President  
Address: 2392 Pioneer Trail  
New Smyrna Beach, FL 32168

Name and Title: Charles Morgan Firestone - Secretary  
Address: 2392 Pioneer Trail  
New Smyrna Beach, FL 32168

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: Charles Morgan Firestone  
Address: 2392 Pioneer Trail  
New Smyrna Beach, FL 32168

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Charles Morgan Firestone  
Address: 2392 Pioneer Trail  
New Smyrna Beach, FL 32168

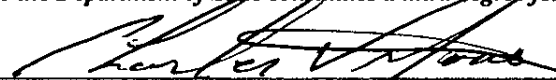
*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*

  
\_\_\_\_\_  
Required Signature/Registered Agent

June 23rd 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

June 23rd 2011

Date

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JUL 14 PM 12:02  
TALLAHASSEE, FLORIDA  
DEPARTMENT OF STATE