PILOWOHIGT

(Re	equestor's Name)	
(Ac	idress)	
(Ac	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	пе) .
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
		1
		ļ





700209834857

07/14/11--01008--006 **70.00

757/10/1

COVER LETTER

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

SUBJECT: Cyclone Car Corporation					
(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)					
Enclosed are an original and one (1) copy of the arti	cles of incorporation and a check for:				
\$70.00 \$78.75	587.50				
Filing Fee Filing Fee	Lifiling Fee Lifiling Fee,				
& Certificate of Status	& Certified Copy Certified Copy & Certificate of				
	Status				
	ADDITIONAL COPY REQUIRED				
	<u> </u>				
FROM: Alan Stamper	e (Printed or typed)				
Name	(Finited of typed)				
1270 Gulf Blvd. #1006					
Address					
Clearwater, FL 33767	State & Zip				
City,	State & Zip				
727-771-8773					
Daytime T	elephone number				
<u>alanstamper@gmail.com</u> E-mail address: (to be used	d 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)

The name of the corp	IAME Cyclone Car Corporation shall be:	on			
12	Principal OFFICE Principal street address 1270 Gulf Blvd. #1006 Clearwater, FL 33767		Mailing address, if different is:		
ARTICLE III PR					
Alternative Ene	ch the corporation is organized is: ergy Vehicles				
	HARES of stock is:100,000,000 NITIAL OFFICERS AND/OR DIRECTO	<u>RS</u>			
	::Alan Stamper President / Treasure				
Address:	1270 Gulf Blvd. #1006 Clearwater, FL 33767				
Name and Title		Name and This			
Address:	×	Name and Title:		9	
Address.		Address.		S	
			E	<u> </u>	
			<u> </u>	<u> </u>	
	X				
Address:		Address:	- 0	<u>_</u>	
				_ <u>~~~</u> ~	
			••	- 콩양	
ARTICLE VI R	EGISTERED AGENT		02	35	
	la street address (P.O. Box NOT acceptable)	of the registered agent is:	2	SNOLL	
Name:	Alan Stamper			·	
Address:	1270 Gulf Blvd #1006				
	Clearwater, FL 33767	_			
ARTICLE VII II	NCORPORATOR				
	ss of the Incorporator is:				
Name:	Alan Stamper				
Address:	1270 Gulf Blvd. #1006	_			
	Cleanwater, FL 33767				
this certificate, am f	as refistered agent to accept service of proce familiar with and accept the appointment as re	ss for the above stated co gistered agent and agree t	rporation at the place design to act in this capacity	ated in	
Tell			07/01/2011		
	Required Signature/Registered Agent		Date		
I submit this docume	ent und affirm that the facts stated herein ar	re true. I am aware that t	the false information submitte	ed in a	
auxumeni io ine stepa	artiment of State constitutes a third degree felo	ny us proviuea jor in \$.81/	.133, F.S.		
4 X X			07/04/2044		
	Required Signature/Incorporator	· · · · · · · · · · · · · · · · · · ·	07/01/2011 Date		