PII 000064598

(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:				

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SECRETARY OF STATE

111 JUL 18 PH 4:

COVER LETTER

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

SUBJECT: Green's Automotive Center, Inc.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the art	ticles of incorporation and a check for:
\$70.00 Filing Fee & Certificate of Status	\$78.75 \$87.50 Filing Fee & Certified Copy Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED
FROM: Michael Green Nam	e (Printed or typed)
5105 Philips Highway	Address
<u>Jacksonville, FL 32207</u> City	, State & Zip
904 725-0035 Daytime	Felephone number
tom@thomasmurphycpa E-mail address: (to be use	a.com ed 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 II	PRINCIPAL OFFICE		
	Principal street address	Mailing	address, if different is:
	105 Philips Hwy.		
<u>. J</u> á	acksonville, FL 32207	 	
			50 N
ARTICLE III I			
	tich the corporation is organized is:		₹Ä ≒ π
Any and all la	wful purposes		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
		SS 8 [
			· * 1
ARTICLE IV	<u>SHARES</u> es of stock is: One Hundred		. DA 36
The number of share	es of stock is: One Hundred		•
	INITIAL OFFICERS AND/OR DIREC		
	le:Michael Green, President	Name and Title:	
Address:	740411 111 6 6	Address:	
	7404 Holiday Rd S		
	Jacksonville, FL 32216		
Name and Tit	le:	Name and Title:	
Address:	****	Address:	
Name and Tit	le:	Name and Title:	
	The Production of the Producti		
ARTICLEVI	REGISTERED AGENT		
	ida street address (P.O. Box NOT acceptat	ole) of the registered agent is:	
Name:	Michael Green		
Address:	7404 Holiday Rd., S.		
	Jacksonville, FL 32216		
ARTICLE VII	INCORPORATOR		
	ess of the Incorporator is:		
Name:	Michael Green		
Address:			
	7404 Holiday Rd., S. Jacksonville, FL 32216		
Handa I am an an an			
	l as registered agent to accept service of p familiar with and accept the appointment (
ans cerujicate, i am	jumular wan and accept the appointment t	is regisierea ageni ana agree to l	аст игиз сарасну
1 7/1	11 D Mar.		7-14-701/
	Required Signature/Registered Agen		7-14-20//
	. •		240
	nent and affirm that the facts stated herei		
tocument to the De	partment of State constitutes a third degree	fetony as provided for in s.817.1	55, F.S.
1 111	//0/_		
1 / 11000	Required Signature/Incorporator		7-14-20//

13.