# P1100069251

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Special Instructions to Filing Officer:				
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SECRETARY OF STATE DIVISION OF CORPORATIONS

- 03 8/2/1/

#### **COVER LETTER**

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

P. O. Box 6327	
Tallahassee, FL 32314	
SUBJECT: Kion Auto Servi (PROPOSED CORPORA)	TE NAME - MUST INCLUDE SUFFIX)
Enclosed are an original and one (1) copy of the artic	cles of incorporation and a check for:
\$70.00 Filing Fee & Certificate of Status	\$78.75  Filing Fee  & Certified Copy  & Certificate of  Status  ADDITIONAL COPY REQUIRED
FROM: Twon Solda Name	(Printed or typed)
4711 N. Lois	5 Que -
tampa fl	33614 State & Zip
813-872-948 Daytime Te	DS elephone number
tuan Saldana 11 (c E-mail address: (to be used	O Hot Mail.com I for future annual report notification)

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



### RECEIVED

## FLORIDA DEPARTMENT OF STATISTICON OF CORPORATIONS Division of Corporations

July 21, 2011

/RECEIVED AUG - 1 2911

JUAN SALDANA 4711 N LOIS AVE TAMPA, FL 33614

SUBJECT: KION AUTO SERVICES INC.

Ref. Number: W11000038263

We have received your document for KION AUTO SERVICES INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

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) 245-6901.

Pamela Smith Regulatory Specialist II

Letter Number: 511A00017277

www.sunbiz.org

DO DOM GOOD DILL

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

ARTICLE I NA The name of the corpor	ME Kion Auto Services :	Inc.	
Tipo number of the corpor	acion shan oo.		
ARTICLE II PR	INCIPAL OFFICE Juan Solda Principal street address 7/1 N. Lois Aug. Mpa Fl. 33614	aña 	Mailing address, if different is:
The purpose for which	the corporation is organized is:	rity.	•
ARTICLE IV SH The number of shares of			
<del></del>	TIAL OFFICERS AND/OR DIRECTORS		
_	<del></del>		e:
Address:	7711 N LOIS Due. A	ddress:	
-			
Nama and Titlar	N	ame and Tit	le:
Address:		ame and Th. .ddress:	
			SEC OR
Name and Title:	N	ame and Tit	le: 5 357
Address:		ddress:	
-			
-			N. T.
	GISTERED AGENT	• . •	
The <u>name and Florida</u> Name:	street address (P.O. Box NOT acceptable) of the	registered ag	gent is:
Address:	Tuan Joldana		
	tampa F/. 33614		
ARTICLE VII IN	CORPORATOR		
The name and addres			
Name:	ztran Saldaña		
Address:	1836 Swarn Que.		
	Tampa 41. 33625		
Having been named a	s registered agent to accept service of process for	r the above s	stated corporation at the place designated in
this certificate, I am fa	millar with and accept the appointment as register	red agent and	d agree to act in this capacity
	<del></del>		つ は べんい
	Required Signature/Registered Agent		7-13-2011
	<b>,</b>		Date
	nt and affirm that the facts stated herein are true		
document to the Depar	tment of State constitutes a third degree felony as	provided for	' in 8.61 /.155, F.S.
			7-12-9011
	Required Signature/Incorporator	<del></del>	Date