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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

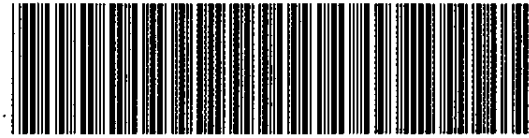
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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11 DEC -7 PM 12:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MRS
12/8

COVER LETTER

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

SUBJECT: Premium Auto Sales of Tampa Bay 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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: David Toms
Name (Printed or typed)

3201 28th St N
Address

St Petersburg, FL 33713
City, State & Zip

727-692-4084
Daytime Telephone number

dtoms1@tampabay.rr.com
E-mail address: (to be used for future annual report notification)

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

Premium Auto Sales of Tampa Bay Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address
3201 28th St N
St Petersburg, FL 33713

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To engage in any activity or business permitted under the laws of the United States and of this State.

ARTICLE IV SHARES

The number of shares of stock is: 6000 The aggregate number of shares that this corporation shall have the authority to issue is 6000 shares of Capital Stock with a par value of \$1.00 per share.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: James Polacek - President Name and Title: _____
Address: 3201 28th St N Address: _____
St Petersburg, FL 33713 _____

Name and Title: David Toms -VP Name and Title: _____
Address: 3201 28th St N Address: _____
St Petersburg, FL 33713 _____

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: James Polacek
Address: 3201 28th ST N
ST Petersburg, FL 33713

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: David Toms
Address: 3201 28th St N
St Petersburg, FL 33713

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

James Polacek
Required Signature/Registered Agent

12/2/11
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.

David Toms
Required Signature/Incorporator

12/2/11
Date