

P11000106990

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

(Business Entity Name)

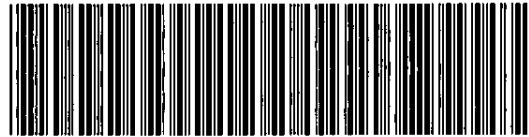
(Document Number)

Certified Copies _____

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Office Use Only



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41-60848

FILED
2011 DEC 16 PM 4:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DEC 20 2011

COVER LETTER

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

SUBJECT: Carodex Dealer Consulting Services, 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: Di Tonia McNealy
Name (Printed or typed)

PO Box 5226
Address

Fort Lauderdale, FL 33310
City, State & Zip

(954) 213-3171
Daytime Telephone number

Imcnealy@g-rydes
E-mail address: (to be used for future annual report notification)

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

11 DEC 16 PM 12:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

December 5, 2011

LA TONIA MCNEELY
PO BOX 5226
FORT LAUDERDALE, FL 33310

SUBJECT: CARODEX DEALER CONSULTING SERVICES, INC.
Ref. Number: W11000060848

We have received your document for CARODEX DEALER CONSULTING SERVICES, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please type the name of the corporation in article I.

You have indicated in your document the ownership and percentages of the authorized shares. Please note this information is not required nor is it maintained by the Department of State. While we cannot require such, it is recommended that it be removed from the document. The only information needed for this filing is the number of authorized shares.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

Please return the corrected original and one copy of 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) 245-6928.

Tim Burch
Regulatory Specialist II
New Filing Section

Letter Number: 911A00027147

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: Carodex Dealer Consulting Services, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:

1881 W. Oakland Park Blvd.
Oakland Park, FL 33309

Mailing address, if different is:

PO Box 5226
Fort Lauderdale, FL 33310

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Business start date 01/01/12
Dealer Consulting Services, Automotive Sales, and workshops
and training for dealers.

ARTICLE IV SHARES

The number of shares of stock is: 1000000 @ Shares
One Hundred = 100,000,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Dr. Toria McNeely
Address: President/CEO/Owner
1881 W. Oakland Park Blvd.
Oakland Park, FL 33309

Name and Title: _____
Address: _____

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:

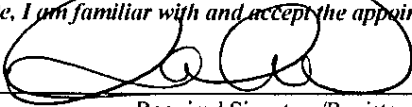
Name: Dr. Toria McNeely
Address: 1881 W. Oakland Park Blvd.
Oakland Park, FL 33309

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Dr. Toria McNeely
Address: 1881 W. Oakland Park Blvd.
Oakland Park, FL 33309

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

11/29/11
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.



Required Signature/Incorporator

11/29/11
Date

This Corporation will start business on 01/01/12
Currently not open for business.

FILED
2011 DEC 16 PM 4:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA