

P12000015219

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

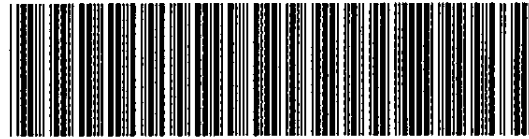
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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02/13/12--01056--005 **170.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 FEB 13 AM 11:19

2/14/12

COVER LETTER

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

SUBJECT: CLBD Auto Sales 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: Craig Becton
Name (Printed or typed)

8864 N Florida Ave
Address

Tampa, FL 33604
City, State & Zip

855-474-2550
Daytime Telephone number

clbdauto@gmail.com
E-mail address: (to be used for future annual report notification)

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DIVISION OF CORPORATIONS

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 I NAME

The name of the corporation shall be: CLBD Auto Sales Inc

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DIVISION OF CORPORATIONS

ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address
8864 N Florida Ave
Tampa, FL 33604

Mailing address, if different is: 12 FEB 13 AM 11:19
2780 E Fowler Ave
Ste 247
Tampa, FL 33612

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
Auto Dealer

ARTICLE IV SHARES

The number of shares of stock is: 2

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Craig Becton Pres
Address: 8864 N Florida Ave
Tampa, FL 33604

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:

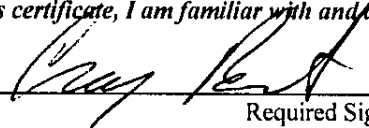
Name: Craig Becton
Address: 8864 N Florida Ave
Tampa, FL 33604

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

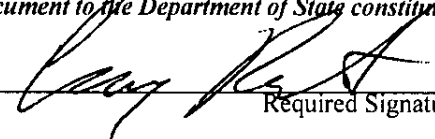
Name: Craig Becton
Address: 8864 N Florida Ave
Tampa, FL 33604

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

2/9/12
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

2/9/12
Date