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DEPAREMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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## **COVER LETTER**

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

SUBJECT:	CERTIFIED DEALER 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 & Certified Copy & Certificate of Status					
	ADDITIONAL COPY REQUIRED					
FROM: _	MICHAEL J. BEAULIEU  Name (Printed or typed)					
5196 MAJORCA CLUB DR Address						
	BOCA RATON, FL 33486 City, State & Zip					
_	803.537.1021  Daytime Telephone number					
MIKEB DEALERSER VICES, COM E-mail address: (to be used 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 I NA The name of the corpo		ER SERVICES,	INC.
51	Principal office Principal street address 196 MAJORCA CLUB DR BOCA RATON FL 33486	Mailing address, if o	·
ARTICLE III PU			
The purpose for which	h the corporation is organized is:		
	SERVIC	LE AUTO DEA	LERS
	WITH	PRODUCTS AND	D SERVICES
ARTICLE IV SF	HARES of stock is: 1,000,000		
ARTICLE V IN	TITIAL OFFICERS AND/OR DIRECTORS	S_PRESIDENT	
Name and Title: Address:	MICHAEL J. BEAULIEU  5196 MAJDRCA CLUB DR  BOCA RATON FI  B3486	Name and Title:	
Name and Title:	<del>_</del>	Name and Title:	
Address:		Address:	
-			
		Address:	
ADTICIE WI DE	GISTERED AGENT		
	a street address (P.O. Box NOT acceptable) of		<i>≨</i> ∽ _
Name: Address:	MICHAELJ. BEAULIEU 5196 MAJORCA CLUBDA		[[: 2 <b>*</b>
Address.	BOCA RATION FI 334	86	
ARTICLE VII IN	CORPORATOR		CO CO STANSON
	a of the Impormentary in		
Name: Address:	MICHAEL J. BEAULIEU		
Address.	MICHAEL J. BEAULIEU 5196 MAJORCA CLUB] BOCA RATON, FL 334	8 <u>L</u>	
	is registered agent to accept service of process imiliar with and accept the appointment as regi	for the above stated corporation at	the place designated in
W-	M Rolin		2/5/12
	Required Signature/Registered Agent		Date
I submit this documer document to the Depar	nt and affirm that the facts stated herein are r rtment of State constitutes a third degree felony	true. I am aware that the false info as provided for in s.817.155, F.S.	rmation submitted in a
IM~	my Rolling	ä	15/12
	Required Signature/Incorporator		Date