

P/20003738

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700230083307

04/20/12--01020--009 **87.50

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 APR 20 PM 1:47

Ps 4/23/12

COVER LETTER

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

SUBJECT: 1 STOP PARTS LOCATOR 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: PEDRO C PEREIRO
Name (Printed or typed)

6299 SR 29 S
Address

LABELLE, FL 33935
City, State & Zip

863-612-4800
Daytime Telephone number

stoppartslocator@yahoo.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)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

ARTICLE I NAME

The name of the corporation shall be:

1 STOP PARTS LOCATOR INC.

12 APR 20 PM 1:47

ARTICLE II PRINCIPAL OFFICE

Principal street address

6299 SR 29 S

LABELLE, FL 33935

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

SELLING OF NEW & USED PARTS

AUTO AND TRUCKS

ARTICLE IV SHARES

The number of shares of stock is: **100**

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: **PEDRO C PEREIRO PRESIDENT**

Address: **6299 SR 29 S**

LABELLE, FL 33935

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: **ROSALIA PEREIRO**

Address: **6299 SR 29 S**

LABELLE, FL 33935

ARTICLE VII INCORPORATOR

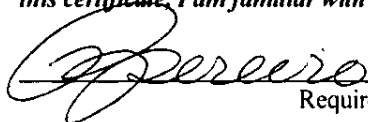
The name and address of the Incorporator is:

Name: **PEDRO C PEREIRO**

Address: **6299 SR 29 S**

LABELLE, FL 33935

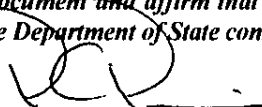
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Required Signature/Registered Agent

4/18/2012
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

Date