

P12000044696

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

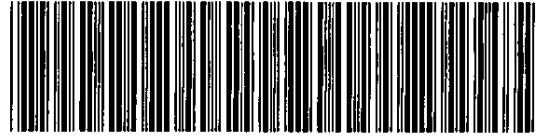
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2012 MAY 14 PM 2:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED
12 MAY 14 PM 2:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Ps steph

COVER LETTER

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

SUBJECT: Auto South of Jay -
(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: Auto South of Jay
Name (Printed or typed)
1763 Peanghorn Ct
Address
Jacksonville FL 32225
City, State & Zip
904-651-4799
Daytime Telephone number
marksgnd22@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)

ARTICLE I NAME

The name of the corporation shall be:

Auto South of Fla Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address

1763 PRONGHORN CT
JACKSONVILLE FL 32225

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Auto Transporting

ARTICLE IV SHARES

The number of shares of stock is:

1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: MARSHALL SANDERS - President Name and Title:

Address: 1763 PRONGHORN CT Address:

JACKSONVILLE FL 32225

Name and Title: Name and Title:

Address: Address:

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: MARSHALL SANDERS
Address: 1763 PRONGHORN CT
JACKSONVILLE FL 32225

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Marshall Sanders
Address: 1763 PRONGHORN CT
JACKSONVILLE FL 32225

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

05/15/12
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

05/15/12
Date