# P12000063564

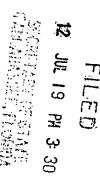
(Requ	uestor's Name)			
(Address)				
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(City/	State/Zip/Phone	<del>: #)</del>		
PICK-UP	☐ WAIT	MAIL		
(Busi	ness Entity Nan	ne)		
(Document Number)				
Certified Copies	Certificates	of Status		
Special Instructions to Filing Officer:				
<del>W12-3</del>	<del>5478</del>			

Office Use Only



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# **COVER LETTER**

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

SUBJECT: ANDRE'S AUTO WO	RKS INC.	
(PROPOSED CORPORA	ATE NAME – <u>MUST INC</u>	LUDE SUFFIX)
Enclosed are an original and one (1) copy of the art	icles of incorporation ar	nd a check for:
\$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
	ADDITIONAL C	OPY REQUIRED
FROM: RUEL LYSEIGHT	e (Printed or typed)	
915 28th Street	Address	
West Palm Beach City	FL 3340 , State & Zip	7
561-856-6796  Daytime	Telephone number	
neville_atc@yahoo.com E-mail address: (to be use	ed for future annual repor	t notification)

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



July 3, 2012

RUEL LYSEIGHT 915 28TH STREET WEST PALM BEACH, FL 33407

SUBJECT: ANDRE'S AUTO WORKS INC

Ref. Number: W12000035478

We have received your document for ANDRE'S AUTO WORKS 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):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

#### Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

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) 245-6052.

Valerie Herring Regulatory Specialist II New Filing Section

Letter Number: 312A00018015

Florida Department of State

**Division Of Corporations** 

## Attn: Mr. Buck Kohr

Please be advised that I have Dissolved my ANDRE'S AUTOWORKS LLC, document # L11000054771

My confirmation # of this Dissolution is 700237108287

I will not REVOKE THIS DISSOLUTION that I filed

Da

RUEL A. LYSEIGHT MGR. ANDRE'S AUTOWORKS LLC.

## ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I	NAME ANDRES ALTO MOR	•	FILED
The name of the cor		RKS INC	12 JUL 19 PH 3: 30
ARTICLE II	PRINCIPAL OFFICE		At the second
۵۰	Principal <u>street</u> address 15 28th Street		Mailing address if different is:
	est Palm Beach FL 33407		The state of the s
_			4
ARTICLE III F	PURPOSE		
	ich the corporation is organized is:		
General auto	mechanic repair works.		
•			
ARTICLE IV The number of share	SHARES  se of stock is: 500		••
	INITIAL OFFICERS AND/OR DIRECTO  Ie:Denise Lyseight - President		::Ruel Lyseight - Director
Address:	915 28th Street	Address:	915 28th Street
	West Palm Beach FL 33407	<u> </u>	West Palm Beach FL 33407
		<del></del>	
	le:	Name and Title	e:
·Address:		Address:	
		<del></del>	
N. 100%		1.70%)	
Name and 11t Address:	le:		e:
, , , , , , , , , , , , , , , , , , , ,			
	REGISTERED AGENT		
	ida street address (P.O. Box NOT acceptable)		ent is:
Name: Address:	Neville Anderson 915 28th Street		
ridaross.	West_Beach FL 33407		
ARTICLE VII	INCORPORATUR		
	ress of the Incorporator is:		
Name:	Denise_Lyseight		
Address:	915_28th_Street	<del></del>	
	West Palm Beach, FL 33407	·	
Having been name	d as-registered agent to accept service of proce	ess for the above st	tated corporation at the place designated in
this certificate, I am	familiar with and accept the appointment as re	egistered agent and	agree to act in this capacity
(V 11	Required Signature/Registered Agent		כוא ככל
1164 (10-	Required Signature/Registered Agent		
	required signature registered Agent		- Date
I submit this docum	nent and affirm that the facts stated herein ar	re true. I am awar	e that the false information submitted in a
uocumen to the De <sub>l</sub>	partment of State constitutes a third degree felo	my as provided for	m 3.01 /.133, 1 .3.

Required Signature/Incorporator