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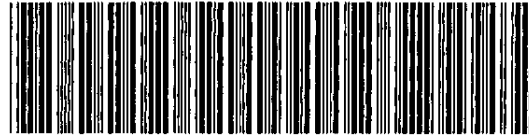
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Shivers JUL 23 2012

COVER LETTER

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

SUBJECT: A & R Automotive 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
☐ \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED

FROM: Benjamin A. Bell, CPA

Name (Printed or typed)

1010 North 12th Avenue, Suite 101

Address

Pensacola, Florida 32501

City, State & Zip

850.429.1581

Daytime Telephone number

ben@benjaminbellcpa.com

E-mail address: (to be used for future annual report notification)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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: A & R Automotive Services, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address
1414 West Government Street
Pensacola, Florida 32501

Mailing address, if different is:

Same

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The purpose of the organization is to provide automotive and truck mechanical repair services to the public on a for-profit basis.

ARTICLE IV SHARES

The number of shares of stock is: The total number of shares of stock to be issued is 1000.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: <u>Rob Reynolds, Officer and President</u>	Name and Title: _____
Address: <u>1414 West Government Street</u>	Address: _____
<u>Pensacola, Florida 32501</u>	_____

Name and Title: <u>Hope Jones, Officer of Finance</u>	Name and Title: _____
Address: <u>1414 West Government Street</u>	Address: _____
<u>Pensacola, Florida 32501</u>	_____

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: Benjamin A. Bell, CPA
Address: 1010 North 12th Ave, Suite 101
Pensacola, Florida 32501

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Benjamin A. Bell, CPA
Address: 1010 North 12th Ave, Suite 101
Pensacola, Florida 32501

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

Benjamin A. Bell, CPA
Required Signature/Registered Agent

July 15, 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.

Benjamin A. Bell, CPA
Required Signature/Incorporator

July 15, 2012

Date

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TALLAHASSEE, FLORIDA