

P12000066237

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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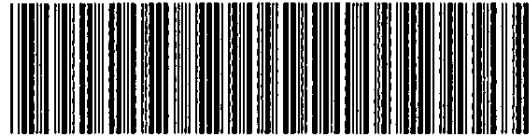
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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07/30/12--01025--019 **78.75

FILED
12 JUL 30 AM 9:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Shivers JUL 31 2012

COVER LETTER

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

SUBJECT: Love's Certified Auto Sales, 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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: **Beth Lewis**

Name (Printed or typed)

1412 Crooked Stick Drive

Address

Valrico FL 33596

City, State & Zip

813-689-1482

Daytime Telephone number

baclewis@aol.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 Love's Certified Auto Sales, Inc.
The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address
1701 E Highway 60
Valrico, Florida 33594

Mailing address, if different is:
1701 E Highway 60
Valrico Florida, 33594

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
The purchase and resale of used automobiles.

ARTICLE IV SHARES

The number of shares of stock is: 100 Shares

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Gay Lynn Love
Address: 1701 E Highway 60
Valrico, Florida 33594
Director

Name and Title: _____
Address: _____

Name and Title: Beth C. Lewis
Address: 1412 Crooked Stick Drive
Valrico, Florida 33596
Director

Name and Title: _____
Address: _____

Name and Title: Scott L Love
Address: 1701 E Highway 60
Valrico, Florida 33594
Director

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: Scott Love
Address: 1701 East Highway 60
Valrico, Florida 33594

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Beth Lewis
Address: 1412 Crooked Stick Drive
Valrico, Florida 33596

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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

Scott Love
Required Signature/Registered Agent
Scott Love

7/26/12
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.

Beth C. Lewis
Required Signature/Incorporator
Beth C. Lewis

7/26/12
Date