

COVER LETTER

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

SUBJECT: Sixto Motor 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:

<input type="checkbox"/> \$70.00 Filing Fee	<input checked="" type="checkbox"/> \$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: Adrian Sixto
Name (Printed or typed)

7004 SW 45 Street
Address

Miami, FL 33155
City, State & Zip

305-603-3214
Daytime Telephone number

ana@sixtomotorsports.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: Sixto Motor Sales, Inc.

FILED

12 SEP 14 PM 1:54

ARTICLE II PRINCIPAL OFFICE

Principal street address

7004 SW 45 street
Miami, FL 33155

Mailing address, if different is:

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Purchase and sale of Automotive Vehicles.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Adrian Sixto Pres.
Address: 7004 SW 45 Street
Miami, FL 33155

Name and Title: _____
Address: _____

Name and Title: Ana Echevarria CFO
Address: 7004 SW 45 Street
Miami, FL 33155

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:

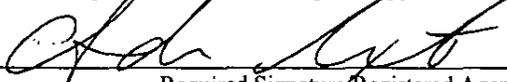
Name: Adrian Sixto
Address: 7004 SW 45 Street
Miami, FL 33155

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

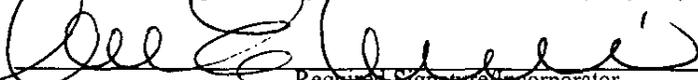
Name: Ana Echevarria
Address: 7004 SW 45 Street
Miami, FL 33155

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

9/10/12
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

9/10/12
Date