## P12000091805

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL .		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificate:	s of Status		
Special Instructions to Filing Officer:				

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: GNL Auto Repair Servi	ices Inc.	
(PROPOSED CORPORA	TE NAME – <u>MUST INCI</u>	LUDE SUFFIX)
Enclosed are an original and one (1) copy of the arti	cles of incorporation and	d a check for:
\$70.00 \$78.75	\$78.75	\$87.50
Filing Fee Filing Fee & Certificate of Status	LFiling Fee & Certified Copy	Filing Fee, Certified Copy
& Certificate of Status	& Certified Copy	& Certificate of
		Status
	ADDITIONAL CO	OPY REQUIRED
	1	
FROM: GNL Auto Repair Service	S INC. (Printed or typed)	<del></del>
710-110	(Criminal or typea)	
1717 East Busch Blvd. L	Init 1108	
	Address	
, Flacks 00040		
<u>Tampa, Florida 33612</u>	State & Zip	
City,	,	
813 505 6782		
Daytime T	elephone number	
anlautaranair@amail.aar	<b>~</b>	
gnlautorepair@gmail.cor	[] d 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 The name of the	NAME GNL Auto Repair Ser	rvices inc.
ARTICLE II	PRINCIPAL OFFICE	
	Principal street address	Mailing address, if different is:
	1717 East Busch Blvd Unit 1108 Tampa, FL 33612	P.O box 6182 Brandon FL 33508
ARTICLE III	<b>PURPOSE</b> which the corporation is organized is:	
Car Repair.	which the corporation is organized is.	<b>→</b> • •
•		200
		TALLAHASSE FLOR
		2 7
		Sign of M
<i>ARTICLE IV</i> The number of sh		ing 是 O
The number of Si	ares of stock is.	- To <b>点</b> - To <b>.</b> - To T
ARTICLE V	INITIAL OFFICERS AND/OR DIRECT	
Name and ` Address:	2524 Lexington Oak Dr Brandon FL 33	Name and Title: <u>Luisa F Santos Vice-President</u> 3511 Address: 2524 Lexington Oak Dr. Brandon FI 335
Address.	2024 Lexington Oak Dr Brandon L 33	2024 Learngton Car Di. Brandon F 333
Name and	Title:	Name and Title:
Address:		
		Name and Title:
Address:		Address:
	***************************************	
	REGISTERED AGENT  orida street address (P.O. Box NOT acceptable	a) of the registered execution
Name:	Juan Echeverry	e) of the registered agent is.
Address:	1215 Morhlake Dr Brandon Fl 3	33511
ARTICLE VII	INCORPORATOR	
The <u>name and ac</u>	Idress of the Incorporator is:	
Name:	Luisa F Santos	
Address:	2524 Lexington Oak Dr Brandon Fl 3	3511
		ocess for the above stated corporation at the place designated in
nis cerujicate, L	im jamular with and accept the appointment as	registered agent and agree to act in this capacity
¥.	huay & chevery	10/25/12
	Required Signature/Registered Agent	Date
. 2012	and the second s	
submit this doc	ument and affirm that the facts stated herein Department of State constitutes a third degree fe	are true. I am aware that the false information submitted in a
www.icia io ine 1	A source of Single Unishingles a labora degree je	nony no provinca joi ni 5.017.133, F.O.
\	with the total and with the	10/20/12
	Required signature/Incomprator	- Ad Data