

P12000097917

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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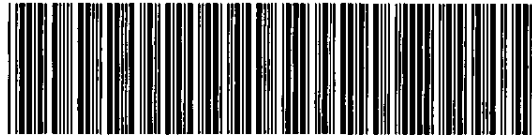
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

6:59 PM NOV 29 2012

COVER LETTER

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

SUBJECT: Car Center Corporation

(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: Car Center Corporation

Name (Printed or typed)

215 Se 3rd Av enue

Address

Hallandale Beach/ Florida - 33009

City, State & Zip

954-417-9669

Daytime Telephone number

cdickert22@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

The name of the corporation shall be: **Car Center Corporation**

ARTICLE II PRINCIPAL OFFICE

Principal street address
215 Se 3rd Avenue Suite 502 C
Hallandale Beach Florida - 33009

Mailing address, if different is:

19470 Peachland Boulevard
Port Charlotte, Florida - 33948

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Purchase and sale of new and used Cars and Trucks
and Import and Export of Motor vehicles

ARTICLE IV SHARES

The number of shares of stock is: **200 shares no par value**

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: **Charles G Dickert Presw. & CEO**
Address: **215 Se 3rd Avenue Suite 502 C**
Hallandale Beach, Florida - 33009

Name and Title: **Vito Scarola Vice Pres. & Secretary**
Address: **19470 Peachland Boulevard**
Port Charlotte, Florida - 33948

Name and Title: **Angelina Scarola Treasurer**
Address: **19470 Peachland Boulevard**
Port Charlotte, Florida - 33948

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: **Charles G Dickert**
Address: **215 Se 3rd Avenue**
Hallandale Beach, Florida - 33009

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: **T.J. Dickert**
Address: **Garth Road Suite 149**
Baytown, Texas - 27521

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

December 1, 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.

Required Signature/Incorporator

December 1, 2012

Date

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12 NOV 28 PM 3:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA