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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To: Division of Corporations
Fax Number : (850)617-6381

From: Account Name : CORPORATE CREATIONS INTERNATIONAL INC
Account Number : 110432003053
Phone : (561)694-8107
Fax Number : (561)694-1639

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
European Automotive Imports, Inc.

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$78.75

SECRETARY OF STATE
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TALLAHASSEE, FLORIDA

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ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME
The name of the corporation shall be: EUROPEAN AUTOMOTIVE IMPORTS, INC

ARTICLE II PRINCIPAL OFFICE
Principal street address

1350 Alternate A1A
Jupiter, Fl. 33469

Mailing address, if different is:

401 Old Dixie Highway #3966
Tequesta, FL 33469

ARTICLE III PURPOSE
The purpose for which the corporation is organized is: any and all lawful business

ARTICLE IV SHARES
The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: James Fischetti Name and Title: _____
Address: President/Secretary/Director Address: _____
199 Barbados Drive
Jupiter, FL 33458

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: James Fischetti

Address: 199 Barbados Drive
Jupiter, FL 33458

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: James Fischetti

Address: 199 Barbados Drive
Jupiter, FL 33458

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

James Fischetti
Required Signature/Registered Agent

1-7-13
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.

James Fischetti
Required Signature/Incorporator

1-7-13
Date