

P13000022878

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

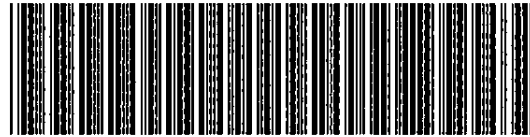
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Certified Copies _____

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13 MAR 11 AM 9:44
SECRETARY OF STATE
TALLAHASSEE FLORIDA

1/4

COVER LETTER

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

SUBJECT: International Fleet Solutions 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

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

FROM: Tracy N. Thrall
Name (Printed or typed)

7322 Manatee Ave. West, Suite 346
Address

Bradenton, FL 34209
City, State & Zip

815-341-0747
Daytime Telephone number

tracy@internationalfleetsolutions.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: International Fleet Solutions Inc.

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ARTICLE II PRINCIPAL OFFICE

Principal street address

7322 Manatee Ave. West, Suite 346
Bradenton, FL 34209

13 MAR 11 AM 9:44
Mailing address, if different is:
SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to provide automotive repair services
to vehicles damaged by hail.

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Tracy N. Thrall, President

Name and Title: _____

Address 7322 Manatee Ave. West, Suite 346

Address: _____

Bradenton, FL 34209

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

(conti.)

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Name and Title: _____ Name and Title: 13 MAR 11 AM 9:44
Address: _____ Address: SECRETARY OF STATE

_____ TALLAHASSEE FLORIDA

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Tracy N. Thrall
Address: 7322 Manatee Ave. West, Suite 346
Bradenton, FL 34209

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Tracy N. Thrall
Address: 7322 Manatee Ave. West, Suite 346
Bradenton, FL 34209

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

 President
Required Signature/Registered Agent

03/05/13

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.


Required Signature/Incorporator

03/05/13

Date