

P130000027647

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

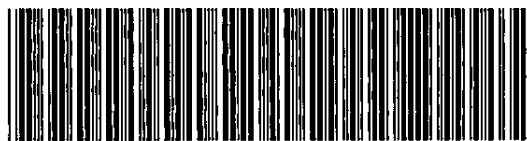
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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03/25/13--01032--026 **87.50

FILED
13 MAR 25 PM 4:42
SECRETARY OF STATE
TALLAHASSEE FLORIDA

114

COVER LETTER

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

SUBJECT: Old Timers Car 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:

☐ \$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: Steven Haisch

Name (Printed or typed)

19202 N Hwy 301

Address

Dade City, FL 33523

City, State & Zip

352-567-3821

Daytime Telephone number

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)

FILED

ARTICLE I NAME

The name of the corporation shall be: Old Timers Car Sales, Inc.

13 MAR 25 PM 4:42

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:
SECRETARY OF STATE
TALLAHASSEE FLORIDA

19202 N Hwy 301

Dade City, FL 33523

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to sell used cars

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Steven Haisch, Pres., Sec

Address: 19202 N Hwy 301

Dade City, FL 33523

Name and Title: Yuvon F. Taylor, VP, Treas

Address: 19202 N Hwy 301

Dade City, FL 33523

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

(conti.)

FILED

Name and Title: _____ Name and Title: 13 MAR 25 PM 4:42
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:

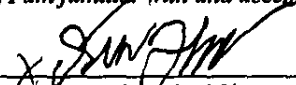
Name: Steven Haisch
Address: 19202 N Hwy 301
Dade City, FL 33523

ARTICLE VII INCORPORATOR

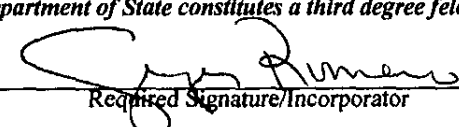
The name and address of the Incorporator is:

Name: Ginger Romano
Address: 37501 Carringer Rd
Dade City, FL 33523

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

X  3-7-2013
Required Signature/Registered Agent 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.

 3-7-2013
Required Signature/Incorporator Date