

P13000041553

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

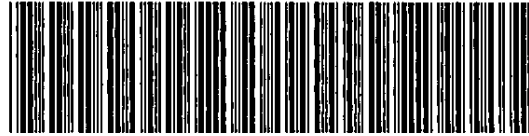
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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04/30/13--01025--011 **87.50

FILED
13 MAY -8 PM 4: 06
SECRETARY OF STATE
TALLAHASSEE, FL 323

1 March 2013

W13-25619
2228

(Handwritten signature)

COVER LETTER

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

SUBJECT: Central Auto Towing & Recovery 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: James M Garfield
Name (Printed or typed)

PO Box 2823
Address

Winter Haven, FL 33881
City, State & Zip

863-651-4178
Daytime Telephone number

Jamesmgarfield1987@gmail.com
E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 1, 2013

JAMES GARFIELD
PO BOX 2823
WINTER HAVEN, FL 33881

SUBJECT: CENTRAL AUTO TOWING & RECOVERY INC.
Ref. Number: W13000025619

RECEIVED
13 MAY - 8 AM 10:24
DIVISION OF CORPORATIONS

We have received your document for CENTRAL AUTO TOWING & RECOVERY INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

A corporation may not act as its own incorporator. Please designate an individual, another active domestic or foreign corporation, with a street address.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Justin M Shivers
Regulatory Specialist II
New Filing Section

Letter Number: 613A00010468

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: Central Auto Towing & Recovery Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

4293 Mahogany Run

Winter Haven, FL 33884

Mailing address, if different is:

PO Box 2823

Winter Haven, FL 33881

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: For Towing

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TALLAHASSEE, FL
SECRETARY OF STATE

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: John Findley ~~CO-OWNER~~ VP

Address: 2410 Regent Way
Kissimmee, FL 34758

Name and Title: James M Garfield ~~CO-OWNER~~ P

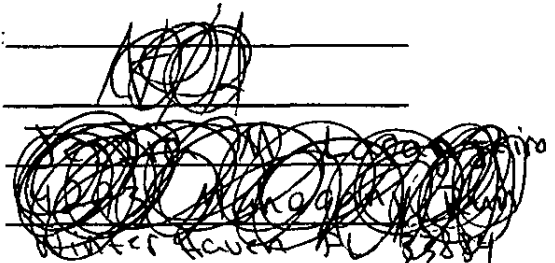
Address: 4293 Mahogany Run
Winter Haven, FL 33884


Name and Title: Basdaye Findley CO-Owner

Address: 2410 Regent Way
Kissimmee, FL 34758

Name and Title: _____

Address: _____


Winter Haven, FL 33884

 Name and Title: Jessia Lorangeira CO-OWNER

Address: _____

Name and Title: _____

Address: N/A

4293 Mahogany Run
Winter Haven, FL 33884

(conti.)

Name and Title: _____
Address: N/A

Name and Title: _____
Address: N/A

ARTICLE VI REGISTERED AGENT

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

Name: James M Garfield
Address: 4293 Mahogany Run
Winter Haven, FL 33884

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TALLAHASSEE, FL

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: ~~Central Auto Towing & Recovery Inc.~~ ← James M Garfield
Address: 4293 Mahogany Run
Winter Haven, FL 33884

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

J M. G
Required Signature/Registered Agent

4-26-2013

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.

J M. G
Required Signature/Incorporator

4-26-2013

Date