# P13000063917

| (Red                    | questor's Name)   |           |
|-------------------------|-------------------|-----------|
| (Add                    | dress)            |           |
| (Add                    | dress)            |           |
| (City                   | y/State/Zip/Phone | #)        |
| PICK-UP                 | ☐ WAIT            | MAIL      |
| (Bu:                    | siness Entity Nam | e)        |
| (Do                     | cument Number)    |           |
| Certified Copies        | _ Certificates    | of Status |
| Special Instructions to | Filing Officer:   |           |
|                         |                   |           |
|                         |                   |           |
|                         |                   |           |

Office Use Only



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13 JUL 29 PH 1: 48

Errante (1)

## COVER LETTER

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

| SUBJECT:             | Darasotas Premier                          | e Automotive<br>ATE NAME - MUST INCL                                 | Znc.<br>ude suffix)  |                    |       |
|----------------------|--|--|--|--------------------|-------|
| Enclosed are an orig | inal and one (1) copy of the art           | cicles of incorporation and  | d 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 CO  |  |                    |       |
| FROM:                | 5382<br>Saraseta                           | d Graves e (Printed or typed)  Catalast Ave Address 342  State & Zip | 1.4.1.4.1.4.5.58.E., #LONDA<br>1.8.8.4.5.5.E. # 1.0.4.D.A  | 13 JUL 29 PM 1: 48 | FILED |
|                      | Daytime T                                  | 152- 3271<br>elephone number   | <del></del>  |                    |       |
|                      | High Performance he                        | d for future annual report   | na Lon Com   | /                  |       |

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

Subject: FW: Fictitious Name Registration - G13000062823; 000249102340 (2nd mailing)

From: Ashton, Kathy (Kathy.Ashton@DOS.MyFlorida.com)

To: highperformancehorsepower@yahoo.com;

Cc: FICWEBCOS@dos.state.fl.us;

Date: Wednesday, July 10, 2013 2:33 PM

#### Have a great day!

----Original Message-----From: OnlineWebFlC

Sent: Saturday, June 22, 2013 3:05 AM

To: HIGHPERFORMANCEHORSEPOWER@YAHOO.COM

Subject: Fictitious Name Registration - G13000062823; 000249102340

Subject: SARASOTA'S PREMIER AUTOMOITIVE

REGISTRATION NUMBER: G13000062823

This will acknowledge the filing of the above fictitious name registration which was registered on June 21, 2013. This registration gives no rights to ownership of the name.

Each fictitious name registration must be renewed every five years between January 1 and December 31 of the expiration year to maintain registration. Three months prior to the expiration date a statement of renewal will be mailed.

If the mailing address of this business changes, please notify this office in writing, or through the link provided on our website www.sunbiz.org <a href="http://www.sunbiz.org/">http://www.sunbiz.org/</a> for Address & FEI/EIN Changes. Please reference the original registration number.

Should you have any questions regarding this matter you may contact our office at (850) 245-6058.

**Division of Corporations** 

@ItsWorkingFL: https://twitter.com/ItsWorkingFL The Department of State is leading the commemoration of Florida's 500th anniversary in 2013. For more information, please go to www.fla500.com.

The Department of State is committed to excellence. Please take our Customer Satisfaction Survey: http://survey.dos.state.fl.us/index.aspx?email=Onlinewebfic@dos.myflorida.com

7/10/2012

RECEIVED

13 JUL 29 PM 1: 36

BEPARTMENT OF STATES
DIVISION OF DEPORTMENTS
DIV

### Sarasota's Premier Automotive, Inc.

5382 Catalyst Ave.

Sarasota, Fl. 34233

Owner: David T. Graves

941-952-3271

July 24, 2013

RE: DOC. # W13000040586

Dear Ms. Cushing,

As per my phone call with your office, I am resending all correspondence regarding my application for fictitious name registration. Please also find a copy of cancelled check.

If there are any other concerns regarding this application, please call me at the phone number listed above. I am quite anxious to get my business open, as you can well understand.

Thank you for your time and effort in this matter.

Sincerely,

David T. Graves

#### **COVER LETTER**

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

| SUBJECT: 5 A             | RASO 45 PREMI                              | er Automotiv                        | e Inc  |
|--------------------------|--|-------------------------------------|--|
|                          | (PROPOSED CORPORA                          | ATE NAMÉ – <u>MÚST INCL</u>         | <u>UDE SUFFIX</u> )  |
| Enclosed are an orig     | inal and one (1) copy of the art           | ticles of incorporation and         | d a check for:   |
| \$70.00<br>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 |  |                                     | PY REQUIRED  |
|                          | DAVID TODD Name                            | , ,                                 |  |
| -                        | 5382 CA talys                              | Address                             |  |
| . <u>5,</u>              | ARASO AA FIC                               | ORINA 34<br>State & Zip             | 1233   |
|                          | 941 - 952 - 32                             |                                     |  |
| <u>h</u> i               | ghpenformance ho                           | Sepace Q Va                         | hoo - Com<br>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)

|   | ta's Premier Automotive, Ir   |
|---|---|
| ARTICLE II PRINCIPAL OFFICE Principal street address                          | Mailing address, if different is:   |
| 5382 CATALYST AVE   | 3375 HOBARI 51.   |
| SARASOTA, FI, 34233   | 4 2   |
| ARTICLE III PURPOSE The purpose for which the corporation is organized is: _j | Automotive Repair Shop  |
|   |   |
|   | - <del>-</del> |
|   | 1   |
| ARTICLE IV SHARES The number of shares of stock is: 100                       | E   |
| The number of shares of stock is:   |   |
| ARTICLE V INITIAL OFFICERS AND/OR D   |   |
| Name and Title: DAVID GRAVES  | OWNER Name and Title:   |
| Address 3375 Hobart<br>NORTH PORT   | ST- Address:  |
|   | 288   |
| Name and Title:   | Name and Title:   |
| Address   | Address:  |
|   |   |
|   |   |
|   |   |
| Name and Title:   | Name and Title:   |
| Name and Title:Address  |   |

| Name and                                 | d Title:  | Name and Title:   |                                  |
|--|---|---|----------------------------------|
| Address                                  |   | Address:  |                                  |
| ARTICLE VI                               | REGISTERED AGENT  |   |                                  |
| The <u>name and Fl</u>                   | orida street address (P.O. Box NOT acceptable) of   | the registered agent is:  |                                  |
| Name:                                    | DAVID T. GRAVES   |   |                                  |
| Address:                                 | 5382 CATALYST AVE<br>SARASOTA FI. 34  | 120   | FIL<br>13 JUL 29<br>ALL ALASS    |
| ARTICLE VII                              | INCORPORATOR  |   |                                  |
| The <u>name and ad</u>                   | Idress of the Incorporator is:  |   | 1: <b>18</b>                     |
| Name:                                    | DAVID T. GRAVES   |   | <u>≅</u>                         |
| Address:                                 | 3375 HOBART ST.   |   |                                  |
|  | 3375 HOBART ST.<br>North PORT, F1. 34   | 4288  |                                  |
| Having been nan<br>this certificate, I d | ned as registered agent to accept service of process<br>am funiliar with and accept the appointment as reg    | for the above stated corporation at a street agent and agree to act in this | the place designated in capacity |
|  | 1/32 thans  |   | 7-24-2013                        |
|  | Required Signature/Registered Agent   |   | Date                             |
|  | ument and affirm that the facts stated herein are to<br>Department of State constitutes a third degree felony |   | mation submitted in a            |
|  | Required Signature/Incorporator   |   | Date                             |