

P 130000067641

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

(Business Entity Name)

(Document Number)

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AUG 16 2013

A. DUNLAP

~~13-41264~~

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FJA Tax and Accounting Services

Accounting, Tax and Business Consultants

P.O. Box 352948
Palm Coast, FL 32135-2948
904-730-6137
386-446-7501
dariusward@earthlink.net

August 13, 2013

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: GT Car Service Inc.

Dear Gentle Person:

We are the accountants for the above named entity and have reviewed the attached letter dated July 23, 2013 regarding the proposed corporate name.

The client has changed the name to GT Car Services Inc. We have looked up such a name on sunbiz.org and found no other business entity using that name. We would therefore assume that the incorporation documents can move forward.

If there is any other information that you may require, please do not hesitate to call.

Very truly yours

A handwritten signature in black ink, appearing to read 'L Amatore', written in a cursive style.

Lawrence L. Amatore

COVER LETTER

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

SUBJECT:

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

GT^{CAR}-SERVICE CENTER INC

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:

Name (Printed or typed)

GT^{CAR}-SERVICE CENTER INC

Address

5143 KINGSBURY STREET

City, State & Zip

JACKSONVILLE FL 32205-6531

Daytime Telephone number

516-404 5327

DARLUS WARD @ EARTH LINK, NET

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

July 23, 2013

DARIUS WARD
GT Service Center Inc.
5143 Kingsbury Street
Jacksonville, FL 32205-6531

SUBJECT: GT SERVICE CENTER, INC.
Ref. Number: W13000041264

We have received your document for GT SERVICE CENTER, 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):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Please return 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.

Andy Dunlap
Senior Section Administrator

Letter Number: 613A00017760

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:

^{CAR}
G T SERVICE CENTER INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

5143 Kingsburg Street

JACKSONVILLE FL 32205-6531

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

REPAIR SERVICE AND

MAINTAIN AUTOMOBILES & TRUCKS

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:

Thomas Pugh Pres

Name and Title:

Address

5143 Kingsburg Street

Address:

JACKSONVILLE FL 32205

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

SECRETARY OF STATE
TALLAHASSEE FLORIDA

13 AUG 16 PM 4:46

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(conti.)

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: Thomas Pugh

Address: 5143 Kings Bay Street
Jacksonville FL 32205

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Thomas Pugh

Address: 5143 Kings Bay Street
Jacksonville FL 32205

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

Thm Pugh

Required Signature/Registered Agent

7/13/13

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.

Thm Pugh

Required Signature/Incorporator

7/13/13

Date