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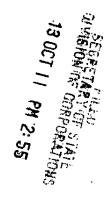
(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	s of Status
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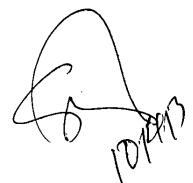
Office Use Only



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COVER LETTER

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

SUBJECT: Sunrise Auto Service, 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 **3** \$87.50 \$78.75 Filing Fee Filing Fee Filing Fee Filing Fee, & Certificate of Status & Certified Copy Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED

FROM:	Elinor Joann Ramiow					
	Name (Printed or typed)					
	8017 US Hwy 301 South					
Riverview, fl. 33578 City, State & Zip						
						813-677-0734
					_	Daytime Telephone number
_	sauto1@tampabay.rr.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)

e name of the corporation shall be: Sunrise Auto Service, Inc.				
17 US H	Principal street address NY 301 South	<u>P.O.</u>	Mailing address, if different is: Box 77	
iverview, Fl. 33578		Riverview, Fl. 33568		
	RPOSE the corporation is organized is: to engage to or activity for which corporations			
number of shares	HARES of stock is: 100		Derek Ramlow T	
number of shares TICLE V IN Name and T	of stock is: 100 IITIAL OFFICERS AND/OR DIRECTO itle: Elinor J Ramlow, P	Name and Title	Derek Ramlow, T	
number of shares	of stock is: 100 IITIAL OFFICERS AND/OR DIRECTO		P.O. Box 77	
Name and T	TITIAL OFFICERS AND/OR DIRECTOR Intelet Elinor J Ramlow, P P.O. Box 77 Riverview, Fl. 33568	Name and Title Address:	P.O. Box 77 Riverview, Fl. 3356	
Name and T	ITTIAL OFFICERS AND/OR DIRECTOR itle: Elinor J Ramlow, P P.O. Box 77	Name and Title Address: Name and Title	P.O. Box 77 Riverview, Fl. 3356	
Name and Ti	ittial officers and/or director Elinor J Ramlow, P P.O. Box 77 Riverview, Fl. 33568	Name and Title Address: Name and Title	P.O. Box 77 Riverview, Fl. 3356	
Name and Ti Address Name and Ti Address	ittial officers and/or director Elinor J Ramlow, P P.O. Box 77 Riverview, Fl. 33568	Name and Title Address: Name and Title Address: Address:	P.O. Box 77 Riverview, Fl. 3356	

Name and	Title:	Name and Title:
Address	<u> </u>	Address:
ARTICLE VI	REGISTERED AGENT	
The name and Flo	rida street address (P.O. Box NOT acceptable) of	the registered agent is:
Name:	Derek Ramlow	
Address:	8017 US Hwy 301 South	
	Riverview, Fl. 33578	
ARTICLE VII	INCORPORATOR	
The name and add	<u>tress</u> of the Incorporator is:	
Name:	Elinor J Ramlow	
Address:	8017 US Hwy 301 South	
	Riverview, Fl. 33578	
Having been nam this certificate, I a	ed as registered agent to accept service of process m familiar with and accept the appointment as reg	for the above stated corporation at the place designated in istered agent and agree to act in this capacity/
		10/8/13
	Required Signature/Registered Agent	Date
	ment and affirm that the facts stated herein are the department of State constitutes a third degree felony	true. I am aware that the false information submitted in a provided for in s.817.155, F.S.
Elino	Required Signature/Incorporator	$\frac{12-8-13}{\text{Date}}$