

P/300010/3/3

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

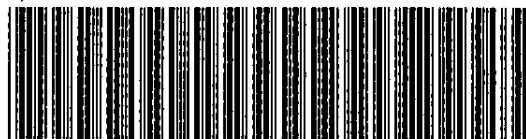
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
2013 DEC 20 PM 3:24

## COVER LETTER

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

SUBJECT: Kiri Jaus Motors Sales Corp.

(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 type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
<b>ADDITIONAL COPY REQUIRED</b>	

FROM: Kireniasalvat

Name (Printed or typed)

12401 W Okeechobee Rd Lot 464

Address

Hialeah Gardens, Florida. 33018

City, State & Zip

786-380-0028

Daytime Telephone number

kireniasalvat@yahoo.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)

**ARTICLE I NAME**

The name of the corporation shall be: Kiri Jaus Motors Sales Corp

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

12401 W Okeechobee Rd Lot 464

Hialeah Gardens, FL 33018

Mailing address, if different is:

12401 W Okeechobee RD Lot 464

Hialeah Gardens, FL 33018

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: to buy and sales used cars.

**ARTICLE IV SHARES**

The number of shares of stock is: 100

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**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Kirenia Salvat / President

Address 12401 W Okeechobee Rd Lot 464

Hialeah Gardens, FL 33018

Name and Title: Joseph Patrick Jaus / Vice-President

Address: 12401 W Okeechobee Rd Lot 464

Hialeah Gardens, FL 33018

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

(cont.)

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_  
Address \_\_\_\_\_ Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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**ARTICLE VI REGISTERED AGENT**

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

Name: Kirenia Salvat  
Address: 12401 W Okeechobee RD Lot 464  
Hialeah Gardens, FL 33018

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Kirenia Salvat  
Address: 12401 W Okeechobee Rd Lot 464  
Hialeah Gardens, FL 33018

*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*

\_\_\_\_\_  
Required Signature/Registered Agent

12/15/2013

\_\_\_\_\_  
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.*

\_\_\_\_\_  
Required Signature/Incorporator

12/15/2013

\_\_\_\_\_  
Date