

P140000023730

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

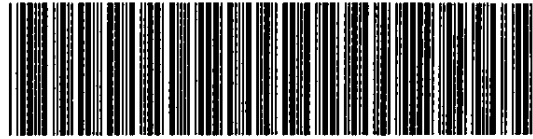
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



200257520212

03/13/14--01013--015 \*\*78.75

FILED  
STORE MAY 21 2014  
DIVISION OF CORPORATIONS  
2014 MAR 13 PM 2:22

114

## COVER LETTER

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

**SUBJECT: GORIS AUTO SALES 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  
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: SEGUNDA CARIDAD GORIS**

Name (Printed or typed)

**7617 OCEAN HARBOR LANE**

Address

**TAMPA, FLORIDA 33615**

City, State & Zip

**813-966-2413**

Daytime Telephone number

**LEONOR.DIAZ@AOL.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)

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATE

**ARTICLE I NAME**

The name of the corporation shall be: GORIS AUTO SALES, INC

2014 MAR 13 PM 2:22

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

8725 W. WATERS AVE.

TAMPA, FLORIDA 33615

Mailing address, if different is:

7617 OCEAN HARBOR LANE

TAMPA, FLORIDA 33615

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: FOR THE PURPOSE OF BUYING AND SELLING USED AUTOMOBILES

**ARTICLE IV SHARES 100**

The number of shares of stock is: 100

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

Name and Title: SEGUNDA C. GORIS PRESIDENT

Address: 7617 OCEAN HARBOR  
LN. TAMPA, FLORIDA  
33615

Name and Title: YSELDA DIAZ Vice President

Address: 9-7TH AVE.  
PASSAIC, N.J  
07055

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

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

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

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

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

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

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

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

(cont.)

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

2014 MAR 13 PM 2:22

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: SEGUNDA C. GORIS  
Address: 7617 OCEAN HARBOR LANE  
TAMPA, FLORIDA 33615

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: SEGUNDA C. GORIS  
Address: 7617 OCEAN HARBOR LANE  
TAMPA, FLORIDA 33615

*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*

Segunda C. Goris  
Required Signature/Registered Agent

3/10/14  
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.*

Segunda C. Goris  
Required Signature/Incorporator

3/10/14  
Date