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(Re	equestor's Name)	.,		
(Ac	ldress)			
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PICK-UP	☐ WAIT	MAIL		
(Ви	usiness Entity Nam	ne)		
(Document Number)				
Certified Copies	_ Certificates	of Status		
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03/05/14--01012--013 **78.75

SECRETARY OF STATE

W414898

COVER LETTER

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

_{subject:} Ma	ndarin A	utoPlex Inc
SUBJECT:		OSED CORPORATE NAME – <u>MUST INCLUDE SUFFIX</u>)
Enclosed are an original	ginal and one (1	1) copy of the articles of incorporation and a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificat	& Certificate of
		Status ADDITIONAL COPY REQUIRED
FROM: _	eborah	Thompson Name (Printed or typed)
5	268 Julir	ngton Forest Dr S
		Address
Ja	acksonv	ille, FL 32258
		City, State & Zip
8	13 433-6	3876
		Daytime Telephone number
M		utoPlex@yahoo.com
	E-mail a	ddress: (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

March 7, 2014

DEBORAH THOMPSON 5268 JULINGTON FOREST DR S JACKSONVILLE, FL 32258

SUBJECT: MANDARIN AUTOPLEX INC

Ref. Number: W14000014898



We have received your document for MANDARIN AUTOPLEX INC and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

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.

Jessica A Fason Regulatory Specialist II

Letter Number: 514A00005062

Division of Communitions D.O. DOV 6207 Wellshooms Florida 2021

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

The name of the corp	IAME poration shall be:	Mandarin AutoPle	x Inc		
ARTICLE II P	PRINCIPAL OI Principal <u>str</u>	PFICE reet address		ing address, if different is	- S:
5268 Julingt Jacksonville	· · · · · · · · · · · · · · · · · · ·	- 	<u></u>		
	,, , , , ,				
ARTICLE III P	URPOSE ch the corporation	on is organized is: selling	used motor v	ehicles	
	HARES 0				
The number of shares		1000		TAL	7
ARTICLE V 13 Name and 1	Doborob	Thompson, President	S Name and Title:		
	5268 Ju	ulington Forest Dr S	Address:		- Ymar v
	Jackso	nville, FL 32258			<u>ت</u> <u>د</u> ب ـــ
	·				2
Name and Ti	ítle:		Name and Title:		
Address			Address:		
	<u></u>				
					
Name and Ti	itle:		Name and Title:		
Address	<u> </u>		Address:	<u></u>	
			-		
			<u> </u>	·	

Name and	l Title:		Name and Title:		·
Address			Address:		and the state of t
			-		·
	<u></u>				
	•				
ARTICLE VI	_REGISTERED A	GENT			
The <u>name and Fl</u>		P.O. Box NOT acceptable) of	the registered age	nt is:	
Name:	Deborah Th	ompson			
Address:	5268 Juling	ton Forest Dr S			
	Jacksonvill	e, FL 32258			
ARTICLE VII	INCORPORATO	R			
The name and ad	dress of the Incorpora	tor is:			
Name:	Deborah	Thompson			
Address:	5268 Juli	ngton Forest Dr S			
	Jackson	ville, FL 32258			
Having been nam this certificate, I a	ed as registered ager yn familiar with and	it to accept service of process accept the appointment as reg	for the above stai istered agent and	ted corporation agree to act in	at the place designated in this capacity
	1=				
Ty Ma	Required Si	gnature/Registered Agent			Date
		nt the facts stated herein are			
document to the L	Department of State co	onstitutes a third degree felon	v as provided for i	n s.817.155, F.	S.
Lill	wat 1	A			
	Required S	Signature/Incorporator			Date
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					I'A MAR 21
					HAS THAN
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