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SECRETARY OF STATE

COVER LETTER

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

SUBJECT: G	alaxie Motor S (PROPOSED CORPORA	ports inc	
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	<u>UDE SUFFIX</u>)
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	d 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 CO	
		YACC Address	
	Sunvise Fl 333 City, 954 257-91 Daytime T		
		halar @ Cmo	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 No. 1 The name of the corp	Noration shall be: Galaxie Mo	torsports in	<u>C</u>
<u>ARTICLE II </u>	PRINCIPAL OFFICE Principal street address	Mailing address, if different is:	
3112 NW 1	73 terrace	<u></u>	me
Sunrise	FL 33323		
ARTICLE III P The purpose for whi	ch the corporation is organized is: Hu	tomotive	Customization
ARTICLE IV So The number of share.	SHARES s of stock is: 100	DRS .	
Name and '	Tiule: Ricardo Chalar Pre-	sident Name and Title:	Z S
Address	3112 NW 123 Terrace	Address:	
7 1001 603	•		80 to 1
	Suncise Fl 33323		10.11
			RS 2
Name and T	itle:	Name and Title:	
Address		Address:	
			
N 177	N. I	Name and White	
	itle:		
Address		Address:	

Name and Title:	Name and Title:
Address	Address:
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of Name: Ricordo Chalar Address: 3112 Nul 123 Jerracu Sunrise Fl 33323	SECRETARY TALLAHASS
The name and address of the Incorporator is: Name: Ricards Chalge	PH 2: 18
Address: 3/12 NW 123 +CVYaCE SUNVISO FL 33323 Having been named as registered agent to accept service of process this certificate, I am families with and accept the appointment as resistence.	s for the above stated corporation at the place designated in
Required Signature/Registered Agent I submit this document and affirm that the facts stated herein are document to the Department of State constitutes a third degree felor Required Signature/Incorporator	I Date / true. I am aware that the false information submitted in a