

PA000093024

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ MAIL

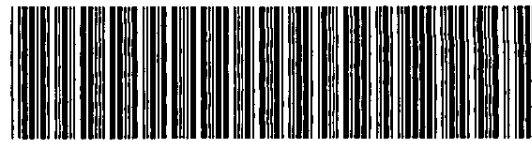
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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COVER LETTER

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

SUBJECT: Flaunt Electric Vehicles, 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
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: Kevin Wray

Name (Printed or typed)

2050 Waterford Estates Dr.

Address

New Smyrna Beach, FL 32168

City, State & Zip

(386)742-9005

Daytime Telephone number

kwrap@flauntvehicles.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: Flaunt Electric Vehicles, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

107 Magnolia Street
New Smyrna Beach, FL 32168

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To manufacture & sell electric vehicles for a profit

ARTICLE IV SHARES 100

The number of shares of stock is: _____

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Kevin Wray, President

Address: 2050 Waterford Estates Dr.
New Smyrna Beach, FL 32168

Name and Title: Kevin Mount, Director

Address: 107 Magnolia St.
New Smyrna Beach, FL 32168

Name and Title: Mark R. Hall, Director

Address: 124 Faulkner St.
New Smyrna Beach, FL 32168

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

(conti.)

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: Ray Landry
Address: 425 Thomez Ct.
Lake Mary, FL 32746

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Cassandra R. Roblee
Address: 28 Cedar Dunes Dr.
New Smyrna Beach, FL 32169

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

Ray Landry
Required Signature/Registered Agent

11-10-2014

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.

Cassie Roblee
Required Signature/Incorporator

11-10-2014

Date

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RECEIVED
TALLAHASSEE, FL 32304