

P14000094197

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

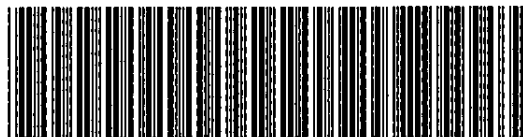
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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NOV 20 2014
S. GILBERT

COVER LETTER

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

SUBJECT: All American Auto Body, 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: All American Auto Body, Inc.

Name (Printed or typed)

2530 E. Irlo Bronson Memorial Hwy.

Address

Kissimmee, FL 34744

City, State & Zip

321-695-3740

Daytime Telephone number

billhowell7@msn.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: All American Auto Body, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

2530 E. Irlo Bronson Memorial Hwy.

Kissimmee, FL 34744

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Auto body shop

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: William W. Howell, President

Address: 382 Covered Bridge Drive
Ocoee, FL 34761

Name and Title: Adam L. Tadlock, Vice President

Address: 2652 Ceram Avenue
Orlando, FL 32837

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: _____

ARTICLE VI REGISTERED AGENT

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

Name: William W. Howell, Jr.
Address: 2530 E. Irlo Bronson Memorial Hwy.
Kissimmee, FL 34744

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: William W. Howell, Jr.
Address: 2530 E. Irlo Bronson Memorial Hwy.
Kissimmee, FL 34744

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

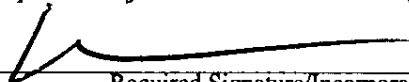


Required Signature/Registered Agent

11/13/2014

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.



Required Signature/Incorporator

11/13/2014

Date