P15000042100

(Re	equestor's Name)	
(Åd	idress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	: #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
1015	30010)

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04/23/15--01010--008 **87.50

SECRETARY OF STATE



COVER LETTER

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

SUBJECT:	reme Automotive &	•		
	(PRC	POSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an	original and one	(1) copy of the art	icles of incorporation and	l a check for:
□ \$70.0 Filing F	ee Filing Fe		\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
			ADDITIONAL CO	PY REQUIRED
FROM		Name	e (Printed or typed)	
	506 NE 43rd Stree		Address	<u> </u>
	Oakland Park, FL.		Address	
		City,	State & Zip	,
	954-688-3210			
		Daytime T	elephone number	· · · · · · · · · · · · · · · · · · ·
	extreme_automotiv	ve@aol.com		
	F-mail	address: (to be use	d for future annual report r	otification)

NOTE: Please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 28, 2015

DANIEL CODRINGTON JR 506 NE 43RD STREET OAKLAND PARK, FL 33334

SUBJECT: EXTREME AUTOMOTIVE INC.

Ref. Number: W15000030010

We have received your document for EXTREME AUTOMOTIVE INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Please return the corrected original and one copy of 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.

Valerie Herring Regulatory Specialist II New Filing Section

Letter Number: 215A00008695



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

ARTICLE I NAM The name of the corpo	<u>IE</u> ration shall be	Extreme Automo	otive & Cycle I	nc.		*15 MAY -8	
ARTICLE II PRI		ICE reet address			Mailing address	SECRETARY TALL AHASSEE s, if different is	OF STATE . FLORIDA
Dakland Park, FL. 33	334						
IRTICLE III PUR The purpose for whic		on is organized is	Profit s:				
					· · · · · · · · · · · · · · · · · · ·		- 1
						•	
RTICLE V INIT	IAL OFFICE		RECTORS		ę·		
	IAL OFFICE	RS AND/OR DIR drington Jr. / Pres	RECTORS	Name and Titl			
RTICLE V INIT	tle: Daniel Cod 4631 NW 3	RS AND/OR DIR drington Jr. / Pres	RECTORS sident	Name and Titl			
Name and Ti	Daniel Cootle:	RS AND/OR DIR drington Jr. / Pres Blst Ave dale, FL. 33309	RECTORS sident	Name and Titl Address:			
Name and Ti	Daniel Cou tle: Daniel Cou 4631 NW 3 # 275 Ft. Laudero	RS AND/OR DIR drington Jr. / Pres Blst Ave dale, FL. 33309	RECTORS sident	Name and Titl Address: Name and Titl Address:			
Name and Ti Address Name and Tit	Daniel Cootle:	RS AND/OR DIR drington Jr. / Pres Blst Ave dale, FL. 33309	RECTORS sident	Name and Titl Address: Name and Titl Address:	e:		
Address Name and Tit Address	tle: Daniel Cod 4631 NW 3 # 275 Ft. Lauderd	RS AND/OR DIR drington Jr. / Pres Blst Ave dale, FL. 33309	RECTORS sident	Name and Titl Address: Name and Titl Address:	e:		



Name a	nd Title:	Name and Title:	15 MAY -8 AM 8: 46
Addres	·	Address:	SECRETARY OF STATE
,			
			·
	REGISTERED AGENT Torida street address (P.O. Box NOT acceptable) of	of the registered agent is:	
Name:	Daniel Codrington Jr.		
Address:	506 NE 43rd Street	- ,	
	Oakland Park, FL. 33334	_	
ARTICLE VII	INCORPORATOR		
The name and a	ddress of the Incorporator is:		
Name:	Daniel Codrington Jr.	_	
Address:	506 NE 43rd Street	_	
	Oakland Park, FL. 33334	_	
Effective date, if	EFFECTIVE DATE; other than the date of filing: late is listed, the date must be specific and cannot ling.)	. (OPTIONAL to be more than five busine) ss days prior or 90 business
	e inserted in this block does not meet the applicable effective date on the Department of State's records.	statutory filing requirements	s, this date will not be listed as
Having been nathis certificate, I	med as registered agent to accept service of process am familiar with and accept the appointment as rej	s for the above stated corpor gistered agent and agree to a	ration at the place designated in act in this capacity
			4/07/2015
	Required Signature/Registered Agent		Date
I submit this do document to the	cument and affirm that the facts stated herein are Department of State constitutes a third degree felon	true. I am aware that the f ny as provided for in s.817.15	alse information submitted in a 55, F.S.
12			4/07/2015
Requ	ired Signature/Incorporator		Date