# P15000073931

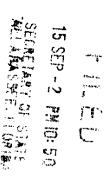
(Requestor's Name)			
(Address)			
(Ac	ddress)		
. (Ci	ty/State/Zip/Phor	ne #)	
PICK-UP	☐ WAIT	MAIL MAIL	
(Bu	usiness Entity Na	me)	
(Do	ocument Number	)	
Certified Copies	_ Certificate	es of Status	
Special Instructions to Filing Officer:			
		1	

Office Use Only



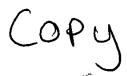
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09/02/15--01004--010 \*\*70.00



SEP 1 0 2015 W PAINTER

# **COVER LETTER**



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

SUBJECT:	HIS AUTO REPAIR CENTER INC		
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	<u>UDE SUFFIX</u> )
Enclosed are an ori	ginal and one (1) copy of the art	cicles of incorporation and	d a check for:
■ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	& Certificate of Status
		ADDITIONAL CO	T REQUIRED
FROM:	HA CHI'S AUTO REPAIR CENTER	INC	f-pag
	Nam	e (Printed or typed)	
92.	30 DANIELS PARKWAY SUITE I	01	
		Address	
FC	ORT MYERS, FL 33912		
	City	, State & Zip	
23	9-334-2120		
<del></del>	Daytime *	Telephone number	
tuf	fbrothers@gmail.com		
	E-mail address: (to be use	ed 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)

Principal street address  0 DANIELS PKWY STE 101	Mailing address, if different is:	
30 DANIELS PKWY STE 101	Maning address, it different is:	
	SAME	
RT MYERS FL 33912		
TICLE III PURPOSE  e purpose for which the corporation is organized is:	ND ALL LAWFUL PURPOSES.	
TICLE IV SHARES 100		
number of shares of stock is:	<del></del>	
TICLE V INITIAL OFFICERS AND/OR DIRECTORS		
Name and Title: FRANCES AMADOR, PRESIDENT	Name and Title:	
Address 2940 35TH AVE NE		
NAPLES FL 34120		
Name and Title:	Name and Title:	
	Address:	
Address	±± <u>0</u> 0 · −	-
Address		די
		ਸ ਹ ' '
		7
		7

Name a	nd Title:	Name and Title:
Addres	SS	Address:
,		
	REGISTERED AGENT	
The <u>name and I</u>	Florida street address (P.O. Box NOT acceptable) of	the registered agent is:
Name:	FRANCES AMADOR	-
Address:	2940 35TH AVE NE	_
	NAPLES FL 34120	_
<u>ARTICLE VII</u>	<u>INCORPORATOR</u>	
The name and a	address of the Incorporator is:	
Name:	FRANCES AMADOR	
Address:	2940 35TH AVE NE	-
, , , , , , , , , , , , , , , , , , , ,	NAPLES FL 34120	-
		-
	EFFECTIVE DATE: 09/01/2015	(OPTIONAL)
(If an effective	date is listed, the date must be specific and cannot	t be more than five business days prior or 90 business
days after the f	filing.)	
	te inserted in this block does not meet the applicable effective date on the Department of State's records.	statutory filing requirements, this date will not be listed as
	amed as registered agent to accept service of process I am familiar with and accept the appointment as reg	s for the above stated corporation at the place designated in gistered agent and agree to act in this capacity
40	ere of	08/28/2015,
0	Required Signature/Registered Agent	Date C
I cubmit this do		true. I am aware that the false information submitted in a
	e Department of State constitutes a third degree felor	
1	IND TO	08/28/2015
Page	uired Signature/Incorporator	Dates
Requ	anea Signature/theorporator	Daies 1

# **COVER LETTER**

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

■ \$70.00 Filing Fee  FROM:	(PROPOSED CORPORA nal and one (1) copy of the art \$78.75 Filing Fee & Certificate of Status	icles of incorporation and  \$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Cop & Certificate Status	of
■ \$70.00 Filing Fee  FROM:	☐ \$78.75 Filing Fee	□ \$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Cop & Certificate Status	of
■ \$70.00 Filing Fee  FROM:	☐ \$78.75 Filing Fee	□ \$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Cop & Certificate Status	of
Filing Fee FROM:	Filing Fee	Filing Fee & Certified Copy	Filing Fee, Certified Cop & Certificate Status	of
Filing Fee FROM:	Filing Fee	Filing Fee & Certified Copy	Filing Fee, Certified Cop & Certificate Status	of
CHA FROM:		& Certified Copy	Certified Cop & Certificate Status	of
FROM:		ADDITIONAL CO	Status	
FROM:		ADDITIONAL CO		D
FROM:				
FROM:				
FROM:				
FROM:	A CHI'S AUTO REPAIR CENTER	INC		
9230				
0230	Name	(Printed or typed)		
9230	DANIELS PARKWAY SUITE 10	)1		
	1	Address		
	T. 41770 T. 4444			
FOR	T MYERS, FL 33912			
•	. City,	State & Zip	·a.	
239-3	334-2120		· · · · · · · · · · · · · · · · · · ·	製造
<u></u>	Daytime T	elephone number		SEP-2
tuffbi	rothers@gmail.com	·	چۆر دى دە	
———	-	10.0		,
		d for future annual report r	otification)	
	E-mail address: (to be use			100 markets

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)

<u>RTICLE II PRINC</u>	Principal <u>street</u> address	Mailing address, if different is:	
9230 DANIELS PKWY STE 101		SAME	
FORT MYERS FL 339	12		
RTICLE III PURPO he purpose for which the	DSE ANY AND the corporation is organized is:	ALL LAWFUL PURPO	OSES.
		- Comple	
RTICLE IV SHARI he number of shares of	ES 100 stock is:		
he number of shares of	stock is:		
The number of shares of IRTICLE V INITIA	stock is:	 Name and Title:	
	stock is:	Name and Title:	
The number of shares of IRTICLE V INITIA  Name and Title	stock is:  LOFFICERS AND/OR DIRECTORS  FRANCES AMADOR, PRESIDENT		
The number of shares of IRTICLE V INITIA  Name and Title	STOCK IS: 100 ST		
The number of shares of IRTICLE V INITIA  Name and Title  Address	STOCK IS: 100 ST	Address:	
The number of shares of IRTICLE V INITIA  Name and Title  Address	FRANCES AMADOR, PRESIDENT 2940 35TH AVE NE NAPLES FL 34120	Address:	
The number of shares of IRTICLE V INITIA  Name and Title  Address  Name and Title	FRANCES AMADOR, PRESIDENT 2940 35TH AVE NE NAPLES FL 34120	Address:	15 SEP -
The number of shares of IRTICLE V INITIA  Name and Title  Address  Name and Title	L OFFICERS AND/OR DIRECTORS FRANCES AMADOR, PRESIDENT 2940 35TH AVE NE NAPLES FL 34120	Address: Name and Title: Address:	SSEP - 2
The number of shares of ARTICLE V INITIA  Name and Title  Address  Name and Title	FRANCES AMADOR, PRESIDENT 2940 35TH AVE NE NAPLES FL 34120	Address: Name and Title: Address:	SEP - 2 P
The number of shares of the number of shares of the	L OFFICERS AND/OR DIRECTORS FRANCES AMADOR, PRESIDENT 2940 35TH AVE NE NAPLES FL 34120	Address: Name and Title: Address:	STORILLEY OF SIA
The number of shares of ARTICLE V INITIA  Name and Title  Address  Name and Title:  Address	L OFFICERS AND/OR DIRECTORS FRANCES AMADOR, PRESIDENT 2940 35TH AVE NE NAPLES FL 34120	Address: Name and Title: Address:	STORILLEY OF SIA

Name an	d Title:	Name and Title:	
Address	3	Address:	
	REGISTERED AGENT		
The name and F	lorida street address (P.O. Box NOT accepta FRANCES AMADOR	able) of the registered agent is:	
Address:	2940 35TH AVE NE	<u></u>	,
Address.	NAPLES FL 34120		
ADTICA E VIII	INCORDOR (TOP		
	INCORPORATOR		A G
Name:	ddress of the Incorporator is: FRANCES AMADOR		SEP -
Address:	2940 35TH AVE NE		
Address.	NAPLES FL 34120		
			5 S
	EFFECTIVE DATE: 09/01/2015 other than the date of filing:	(OPTIONAL)	<b>7</b> 5.
(If an effective of days after the fi	late is listed, the date must be specific and		days prior or 90 business
Note: If the date	e inserted in this block does not meet the app		this date will not be listed as
the document's e	effective date on the Department of State's re	cords.	
	med as registered agent to accept service of p am familiar with and gegept the appointmen		
Tu	incut)		08/28/2015
	Required Signature/Registered Age	nt	Date
	cument and affirm that the facts stated here Department of State & Astitutes a third degre		
FR	11	eguing as province for at stoll 11100	08/28/2015
Requ	ired Signature/Incorporator		Date