

P160000006330

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400280640184

01/12/16--01014--018 **78.75

FILED
16 JAN 12 PM 4:12
CLERK OF COURT
TALLAHASSEE, FLORIDA

MD 1/25

COVER LETTER

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

SUBJECT: Undercar Specialists of Orlando, 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: Jason Matson Sr

Name (Printed or typed)

5324 Hillside Drive

Address

Orlando, FL 32810

City, State & Zip

321-262-5650

Daytime Telephone number

UndercarOrlando@gmail.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: Undercar Specialists of Orlando, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address
5324 Hillside Drive, Orlando, FL 32810

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Automotive Repair and Sales

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Jason Matson Sr, President Name and Title: _____

Address 5324 Hillside Drive Address: _____

Orlando, FL 32810 _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

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 the registered agent is:

Name: Jason Matson Sr. _____

Address: 5324 Hillside Drive _____

Orlando, FL 32810 _____

FILED
16 JAN 12 PM 4:12
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VII INCORPORATOR

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

Name: Jason Matson Sr. _____

Address: 5324 Hillside Drive _____

Orlando, FL 32810 _____

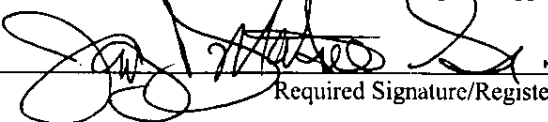
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 01/11/2016 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

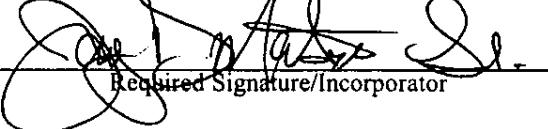


Required Signature/Registered Agent

01/07/2016

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

01/07/2016

Date