

12/28/2008

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Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
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Phone : (305)552-5973
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FLORIDA PROFIT/NON PROFIT CORPORATION COMPLETE AUTO FINANCE CORP

Certificate of Status	0
Certified Copy	1
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Corporate Filing Menu

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2/17/16

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16 FEB 16 PM 1:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
16 FEB 16 PM 4:47

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ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

16 FEB 16 PM 1:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME: The name of the corporation is:

Complete Auto Finance Corp.

ARTICLE II PRINCIPAL OFFICE:

The principal street address and mailing address is:

3501 NW 27th AVE

MIAMI FL 33142

ARTICLE III SHARES: The number of shares of stock is: 100

ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:

Ismael Telfeja Pres.

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:

The name and Florida street address (PO Box not acceptable) of the registered agent is:

ISMAEL TELFEJA

3501 NW 27th AVE

MIAMI FL 33142

ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:

ISMAEL TELFEJA

3501 NW 27th AVE

MIAMI FL 33142

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H16000033323

Required Signatures:

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

[Signature] 2-16-16
Registered Agent 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.

[Signature] 2-16-16
Incorporator Date

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DEPT. OF STATE
TALLAHASSEE, FL 32301

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