

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

Account Number :: I20000000019 Phone (305) 552-5973

Fax Number : (305)675-5944

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

FLORIDA PROFIT/NON PROFIT CORPORATION UNIQUE AUTO SOLUTIONS INC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

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ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:	
Unique Auto Solutions INC	
ARTICLE II PRINCIPAL OFFICE:	
The principal street address and mailing address is:	
3501 NW 27 - AUE MIAMI F1. 33142	
MIAMI, 71. 33142	
·	
ARTICLE III SHARES: The number of shares of stock is: 100	
•••	
ARTICLE IV INITIAL DIRECTORS At. D/OR OFFICERS:	
ISMAR TO HEIR (P.)	
ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:	
The name and Florida street address (PO Box not acceptable) of the registered agent is:	
_Ismael lefleja	
_ 3501 NW 27th Ave	
· Miami FL 33142	

INCORPORATOR: The name and address of the Incorporator is:

Feb 17 2016 1:41PM HP Fax

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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

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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.