

P160000021548

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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## COVER LETTER

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

**SUBJECT:** Gustavo Motor Repairs, 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:** Carlos Rodriguez

Name (Printed or typed)

8406 Crystal Harbor Dr., Suite 102

Address

Tampa, FL 33615

City, State & Zip

(917) 993-1453

Daytime Telephone number

carlos\_rodriguez74@hotmail.com

E-mail address: (to be used for future annual report notification)

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

15 MAR - 9 AM 11:46

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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 22, 2016

CARLOS RODRIGUEZ  
8406 CRYSTAL HARBOR DR., SUITE 102  
TAMPA, FL 33615

SUBJECT: GUSTAVO MOTOR REPAIRS, INC.  
Ref. Number: W16000012975

We have received your document for GUSTAVO MOTOR REPAIRS, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The attached form must be completed in order to file the document.

If we have had no written response within 60 days of this letter, we will consider your document abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

New Filing Section.

Letter Number: 016A00003611

W160000 12975

# 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: Gustavo Motor Repairs, Inc.

## ARTICLE II PRINCIPAL OFFICE

Principal street address  
8406 Crystal Harbor Dr.  
Suite 102  
Tampa, FL 33615

Mailing address, if different is:

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Any and all lawful business

## ARTICLE IV SHARES

The number of shares of stock is: 1000

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Carlos Rodriguez, VP

Address: 8406 Crystal Harbor Dr.  
Suite 102

Tampa, FL 33615

Name and Title: Gustavo Rojas, P

Address: 8406 Crystal Harbor Dr.  
Suite 102

Tampa, FL 33615

Name and Title: Jenny Paula Rojas, VP

Address: 8406 Crystal Harbor Dr.  
Suite 102

Tampa, FL 33615

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

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: Carlos Rodriguez

Address: 8406 Crystal Harbor Dr, Suite 102  
Tampa, FL 33615

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16 MAR -8 AM 11:46  
TAMPA, FL  
SECRETARY OF STATE

**ARTICLE VII INCORPORATOR**

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

Name: Carlos Rodriguez

Address: 8406 Crystal Harbor Dr, Suite 102  
Tampa, FL 33615

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: 01/01/2016 (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*

Carlos R

Required Signature/Registered Agent

02/23/2016

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.*

Carlos R

Required Signature/Incorporator

02/23/2016

Date