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16 JUN -3 PM 1:51
SECRETARY OF STATE
TALLAHASSEE FLORIDA

N. Culligan JUN - 3 2016

COVER LETTER

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

SUBJECT: ADVANTAGE AUTO LOCATORS 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 ☒ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: KEVIN D. KRALL

Name (Printed or typed)

3240 NE 43RD PLACE

Address

OCALA, FL. 34479

City, State & Zip

(352)804-8910

Daytime Telephone number

KEVINKRALL78@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: ADVANTAGE AUTO LOCATORS INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address
3240 NE 43RD PLACE
OCALA, FL. 34479

Mailing address, if different is:
805 S. MAGNOLIA AVENUE, SUITE # D
OCALA, FL. 34470

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: AUTO LOCATOR SERVICE

ARTICLE IV SHARES

The number of shares of stock is: 1,000

SECRET
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ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: KEVIN D. KRALL - PRESIDENT

Name and Title: _____

Address 3240 NE 43RD PLACE
OCALA, FL. 34479

Address: _____

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: KEVIN D. KRALL _____

Address: 3240 NE 43RD PLACE _____

OCALA, FL. 34479 _____

ARTICLE VII INCORPORATOR

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

Name: KEVIN D. KRALL _____

Address: 3240 NE 43RD PLACE _____

OCALA, FL. 34479 _____

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 06/01/2016 (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

Required Signature/Registered Agent

06/01/2016

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

06/01/2016

Date