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(Re	questor's Name)			
(Ad	dress)	·		
(Ad	ldress)			
(Cit	ty/State/Zip/Phon	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates of Status			
Special Instructions to Filing Officer:				

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AS THE SO PHIS: 31

EFFECTIVE DATE 07/20/16

2 08/03/16

COVER LETTER

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

SUBJECT: Dell Aut	osales, Incorporated		
	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u> I	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the ar	ticles of incorporation and	d a check for:
\$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fcc & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate o Status
		ADDITIONAL CO	
FROM:	o R. Grez Nam	e (Printed or typed)	
4014		Address	
Tam	pa, FL 33618	•	
	City	, State & Zip	
813.	376.3581		
<u></u>	Daytime 7	Telephone number	
F	RANX @ VIGILANT E-mail address: (to be use	Consuctive Conditions of the Condition o	om 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)

The name of the corpora	Dell Autosales, Inc.				
ARTICLE II PRINC		Mailing a	Mailing address, if different is:		
6001 N. 50th St.	. , ,	4014 Hudson Terr	4014 Hudson Terrace		
Tampa, FL 33610		Tampa, FL 33618			
ARTICLE III PURPO The purpose for which t	OSE he corporation is organized is:	r any and all lawful business.			
	·				
			55 (28 C		
			20 100		
ARTICLE IV SHARE The number of shares of	stock is:		PHI2: 31		
	L OFFICERS AND/OR DIRECT , Julio R Grez	ORS Name and Title:			
Address	4014 Hudson Terrace				
	Tampa, FL 33618				
Name and Title:		Name and Title:			
Address					
	***	***************************************			
Name and Title:		Name and Title:			
Address		Address:	·····		

name a	nd Title:	Name and Title:	
Addres	SS	Address:	
ARTICLE VI	REGISTERED AGENT		
The name and I	Florida street address (P.O. Box NOT acc	eptable) of the registered agent is:	
Name:	Frank J Casey		
Address:	16310 E. Course Drive		
ruuress.	Tampa, FL 33624		
			= = = = = = = = = = = = = = = = = = =
ARTICLE VII	INCORPORATOR		
The name and a	address of the Incorporator is:		2) - 3. 5) - 3. 5)
Name:	Frank J. Casey	,	. 1
Address:	16310 E. Course Drive		70
Addiess.	Tampa, FL 33624	·····	
Effective date, is	EFFECTIVE DATE: f other than the date of filing: date is listed, the date must be specific a	(OPTIONAL)	s days prior or 90 business
days after the f			
the document's	effective date on the Department of State's	records.	
	mad as registered agent to accept semiles	of process for the above stated corpora	ution at the place designated t
Having been na this certificate, I	am familiar with and accept the appointm	eni us regisiereu ugeni unu ugree io uc	i in this cupicity
Having been na this certificate, I	am Jawiliar with and accept the appointm	eni us regimereu ageni una agree io ac	f = f
Having been na this certificate, I	Required Signature/Registered A		7/21/16 Date
this certificate, I	am familiar with and accept the appointm	agent erein are true. I am aware that the fa	7/21/16 Date Use information submitted in