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Division of Corporations

Florida Department of State

Division of Corporations

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To:

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

From:

Account Name : KRISJOENNA SERVICES, INC.
Account Number : I20080000033
Phone : (305)644-3055
Fax Number : (305)644-3052

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

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION

A.S.A. TIRES, CORP.

Certificate of Status	1
Certified Copy	0
Page Count	01
Estimated Charge	\$78.75

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COVER LETTER

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

SUBJECT: A.S.A. TIRES, CORP

(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: NOHEMI MORENO

Name (Printed or typed)

22721 SW 88 PL SUITE 8

Address

CUTLER BAY FL 33190

City, State & Zip

(704) 5266814

Daytime Telephone number

KRISJOENNA@YAHOO.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: A.S.A. TIRES, CORP

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

22721 SW 88 PL SUITE 8

CUTLER BAY FL 33190

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ALL PURPOSE

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: SAMUEL ALFARO

Name and Title: PRESIDENT

Address 22721 SW 88 PL SUITE 8

Address: _____

CUTLER BAY FL 33190

Name and Title: NOHEMI MORENO GONZALEZ

Name and Title: VICE- PRESIDENT

Address 22721 SW 88 PL SUITE 8

Address: _____

CUTLER BAY FL 33190

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

16 AUG 1 PM 2:52

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: NOHEMI MORENO GONZALEZ
Address: 22721 SW 88 PL SUITE 8
CUTLER BAY FL 33190

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: NOHEMI MORENO GONZALEZ
Address: 22721 SW 88 PL SUITE 8
CUTLER BAY FL 33190

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 08/09/2016 (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

Nohemi Moreno G. 08/09/2016
Required Signature/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.

Nohemi Moreno G. 08/09/2016
Required Signature/Incorporator Date