

P/17000046532

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17 MAY 25 AM 11:23
SECRETARY OF STATE
TALLAHASSEE FLORIDA

05/26/17

COVER LETTER

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

SUBJECT: 11:1 Automotive, 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: W. Patrick Westerfield, Esq

Name (Printed or typed)

Law Offices of Clint Curtis & Associates, PA -- 7217 E. Colonial Dr. #113

Address

Orlando, FL 32807

City, State & Zip

(407) 384-3120

Daytime Telephone number

Patrick@ClintCurtis.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: 11:1 Automotive, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address

425 Coleman St.

Titusville, FL 32796

Mailing address, if different is:

4935 Walton Ave.

Titusville, FL 32780

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Any and all lawful activities or business permitted under the laws of

United States, the State of Florida, or any other state, country, territory or nation.

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TALLAHASSEE, FLORIDA

ARTICLE IV SHARES

The number of shares of stock is: 300

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Jacob D. Spurgeon, Pres. and Director

Address: 4935 Walton Ave.

Titusville, FL 32780

Name and Title: _____

Address: _____

Name and Title: Joshua A. Russell, Director

Address: 2955 La Cita Lane

Titusville, FL 32780

Name and Title: _____

Address: _____

Name and Title: Charles D. St. Germain, Director

Address: 7185 Camilo Road

Cocoa, FL 32927

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: Jacob D. Spurgeon
Address: 4935 Walton Ave.
Titusville, FL 32780

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Jacob D. Spurgeon
Address: 4935 Walton Ave.
Titusville, FL 32780

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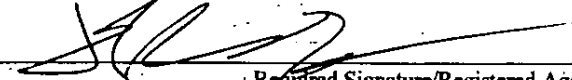
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 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

5/23/17
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

5/23/17
Date