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(Re	equestor's Name)		
(Ad	dress)		
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(Cit	ty/State/Zip/Phone	÷#)	
PICK-UP	☐ WAIT	MAIL	
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SECRETANT OF STATE
ALLAMASSEE FLORIDA

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COVER LETTER

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

COLUMN TO COURT	AST REPAIRS, INC.		
	(PROPOSED CORPORA	NTE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an or	iginal 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 Fee & Certified Copy	& Certificate of Status
		ADDITIONAL CO	DPY REQUIRED
FROM: _	&J FAST REPAIRS, INC.	e (Printed or typed)	
10	000 BRENTON MANOR DR.	- (
		Address	
W	INTER HAVEN, FL. 33881		
	City	. State & Zip	
40	07-222-8481		
_	Daytime	Telephone number	
Si	TEINJACQUIE@GMAIL.COM		
	E-mail address: (to be use	ed 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)

IKTICLE II FRIN	<u>'CIPAL OFFICE</u> Principal <u>street</u> address	Mailing a	ddress, if different is:
1000 BRENTON MA	NOR DR.	P.OBOX 581	
WINTER HAVEN, F	L. 33881	HAINES CITY, F	L. 33845
ARTICLE III PURI The purpose for which			
LAWFUL BUSINES			
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ARTICLE IV SHA	<u>RES</u> 100		E
The number of shares of	of stock is:		- S
The number of shares of	of stock is:		
The number of shares of shares of the number of shares of the shares of	f stock is:	Name and Title:	05 81
The number of shares of shares of the number of shares of the shares of	of stock is:		05 81
The number of shares of shares of the number of shares of the share and Ti	IAL OFFICERS ANDIOR DIRECTORS JACQUIE STEIN, PRESIDENT 1000 BRENTON MANOR DR		05 Ratio
The number of shares of ARTICLE V INIT. Name and Ti Address	IAL OFFICERS AND/OR DIRECTORS JACQUIE STEIN, PRESIDENT 1000 BRENTON MANOR DR. WINTER HAVEN, FL. 33881	Address:	OS RAINA
The number of shares of ARTICLE V INIT. Name and Ti Address Name and Tit	IAL OFFICERS AND OR DIRECTORS JACQUIE STEIN, PRESIDENT 1000 BRENTON MANOR DR. WINTER HAVEN, FL. 33881	Address: Name and Title:	05
The number of shares of ARTICLE V INIT. Name and Ti Address	IAL OFFICERS AND/OR DIRECTORS JACQUIE STEIN, PRESIDENT 1000 BRENTON MANOR DR. WINTER HAVEN, FL. 33881	Address: Name and Title:	OS RAINA
The number of shares of ARTICLE V INIT. Name and Ti Address Name and Tit	IAL OFFICERS AND OR DIRECTORS JACQUIE STEIN, PRESIDENT 1000 BRENTON MANOR DR. WINTER HAVEN, FL. 33881	Address: Name and Title: Address:	05
The number of shares of ARTICLE V INIT. Name and Ti Address Name and Tit Address	IAL OFFICERS AND/OR DIRECTORS JACQUIE STEIN, PRESIDENT 1000 BRENTON MANOR DR. WINTER HAVEN, FL. 33881	Address: Name and Title: Address:	OS .



Name ar	nd Title:	Name and Title:
Address	s	Address:
	REGISTERED AGENT Torida street address (P.O. Box NOT acceptal	No. of the registered easy is:
Name:	JACQUIE STEIN	mey of the registered agent is.
Address:	1000 BRENTON MANOR DR.	
	WINTER HAVEN, FL. 33881	
ARTICLE VII	<u>INCORPORATOR</u>	FIL 18 MAR -8 SECRETANA ALLAHASS
The name and a	ddress of the Incorporator is:	ASSEE
Name:	JACQUIE STEIN	
Address: 1000 BRENTON MANOE	1000 BRENTON MANOR DR.	FILED AR -8 AM 6: 05 LIAND STEADER HASSEE, FLORID
	WINTER HAVEN, FL. 33881	
<u>ARTICLE VIII</u>	EFFECTIVE DATE:	
Effective date, if	f other than the date of filing:	(OPTIONAL) sannot be more than five days prior or 90 days after the
filing.)	date is instear, the date must be specific and t	annot be more than five days prior or 70 days after the
	e inserted in this block does not meet the applieffective date on the Department of State's reco	cable statutory filing requirements, this date will not be lisords.
	am familiar with and accept the appointment	rocess for the above stated corporation at the place design as registered agent and agree to act in this capacity
X	81 tan	FEB 26, 2018
-{	Required Signature/Registered Agen	JACQUIESTEIN Date
document to the	cument and affirm that the facts stated herei Department of State constitutes a third degree	n are true. I am aware that the false information submitt felony as provided for in s.817.155, F.S.
	GTEIN ired Signature/Incorporator JACQUI	FEB 26, 2018
	1 1 -1	Date



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