P18000052054

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

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18 JUN-8 AM 10: 43
SECRETARY OF STATE
ALLAHASSEE, FLORIDA

JUN 1 2 2018 T SCHROEDER

COVER LETTER

то:	Charter Section Division of Cor					
SUBJI	ЕСТ:	Name of	Resulting Florida	Tag	Corporation	
		Name of	Kesutting r torida	Prom	Corporation	
		e of Conversion. Article: Profit Corporation" in ac			ees are submitted to convert an 15, F.S.	"Other Business
Please	return all corresp	ondence concerning this	s matter to:			
	Pierc	e <u>Bournally</u> Contact Person	.b	-		
				_		
		Firm/Company				
_	10935	Pennfield R	d	-		
	Centerni	ile Oh. 45 City. State and Zip Code	458	-		
Е	્રેલ્ડડપ i-mail address: (n	pho hot man	ial report notifica	tion)		
For fur	ther information	concerning this matter,	please call:			
	Pierre P Name of Co	Doumalhab Intact Person	at (<u>937</u> Area C) <u>6</u> ode and	09 - 9083 I Daytime Telephone Number	
Enclos	ed is a check for	the following amount:				
7 1 S10	5.00 Filing Fees	□\$113.75 Filing Fees and Certificate of Status	□\$113.75 Filing and Certified Co		☐\$122.50 Filing Fees. Certified Copy. and Certificate of Status	
New F Division	ET ADDRESS: illings Section on of Corporation Building executive Center			New F Division P. O. F	ING ADDRESS: illings Section on of Corporations Box 6327 assee, FL 32314	

Tallahassee, FL 32301

Certificate of Conversion For "Other Business Entity" Into Florida Profit Corporation

This Certificate of Conversion <u>and attached Articles of Incorporation</u> are submitted to convert the following "Other Business Entity" into a Florida Profit Corporation in accordance with s. 607.1115, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is:
AutoLinx LLC L17-102785
Enter Name of Other Business Entity
2. The "Other Business Entity" is a
first organized, formed or incorporated under the laws of
on 5/8/2017 Enter date "Other Business Entity" was first organized, formed or incorporated
Enter date "Other Business Entity" was first organized, formed or incorporated
3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the laws of which it is now organized, formed or incorporated:
4. The name of the Florida Profit Corporation as set forth in the attached Articles of Incorporation:
Enter Name of Florida Profit Corporation
5. If not effective on the date of filing, enter the effective date: 4/1/2. (The effective date: Cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.) 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.

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SECRETARY OF STATE

Signed this 7 th day of June	20_18	
Required Signature for Florida Profit Corporation:		
Signature of Chairman, Vice Chairman, Director, Office Incorporator: Printed Name: Piecre boumanhalTitle: Pro	er, or, if Directors or Officers have not beer	selected, an
Required Signature(s) on behalf of Other Business E		ı.]
Signature: PRALL		
Printed Name: Pierce Boumalhab		
Signature:		
Printed Name:	Title:	
Signature:		
Printed Name:		
Signature:		
Printed Name:	Title:	
Signature:		
Printed Name:	Title:	
Signature:		
Printed Name:	Title:	
If Florida General Partnership or Limited Liability Signature of one General Partner.	Partnership:	
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	Limited Partnership:	
If Florida Limited Liability Company: Signature of a Member or Authorized Representative.		
All others: Signature of an authorized person.		
Fees: Certificate of Conversion:	\$35.00	18.

Page 2 of 2

\$70.00

\$8.75 (Optional)

\$8.75 (Optional)

Fees for Florida Articles of Incorporation:

Certified Copy:

Certificate of Status:

ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME	A 1 / -
The name of the corporation shall be:	AutoLinx, Inc.
ARTICLE II PRINCIPAL OFFICE	
The principal place of business/mailing address is:	
Principal street address	Mailing address, if different is:
1518 E. Fletcher Are	10935 Pennfield Rd
Tampa FL 33612	Conternile, Oh 45458
ARTICLE III PURPOSE	
The purpose for which the corporation is organized is	:
	Used Car Dealership.
	,
	· · · · · · · · · · · · · · · · · · ·
	T _A
	78
	SSE 8
The number of shares of stock is:	Shaces E. FLORIDA
ARTICLE V INITIAL OFFICERS AND/OR I	DIRECTORS REF
Name and Title: Pierre Boumalhab, Pre-	Siden Name and Title:
Address: 10935 Pennfield Rd	Address:
anterille, Oh. 45458	
Name and Title:	Name and Title:
Address:	Address:
Name and Title:	Name and Title:
Address:	

ARTICLE VI REGISTERED AGENT
The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:
Name: Pierre Boumalhab
Address: 1701 N Lois Ave.
Jampa fl 33607 (apt #459)
ARTICLE VII INCORPORATOR
The <u>name and address</u> of the Incorporator is:
Name: Pierre Boumalhab
Address: 10935 Pennfield Rd
Conterville, Dh. 45458

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
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WK dw/ (-19
Required Signature/Registered Agent Date
I submit this document and affirm that the facts stated herein are true. I am aware that any 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.
(1/3/ /2/
Required Signature Incorporator Date
Jan

FILED
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FALL AHASSEE. FLORIDA