Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6381

from:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019 Phone : (305)552-5973 Fax Number : (305)675-5944

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 CASINO AUTO CORP

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

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Help

ARTICLES OF INCORPORATION In compliance with Chapter 607 (Profit)

ARTICLE 1 NAME: The name of the corporation is:	
Casino Auto COMP	· .
ARTICLE II PRINCIPAL OFFICE:	
The principal street address and mailing address is:	
- 965 NW 128 CT	•
Mani F1- 33187	
	• •
ARTICLE III SHARES: The number of shares of stock is:	
	- •
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:	
- Chris Galdeson (P)	. :
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ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:	0 35
The name and Florida street address (PO Box not acceptable) of the registered agent is	
M. T. S. C.	
- 11am FL 35/82	,
Chris Culderon	·
	•
ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:	·
- Chris Cabaron	
- 965 NW 128th C/	• •
Miami FL 33182	

Required Signatures:

Signature of a member or an authorized representative of a member.

In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury 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.

Typed or printed name of signee

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S..

Registered Agent's Signature (REQUIRED)