

**P18000083402**

**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 : CORPORATE CREATIONS INTERNATIONAL INC.  
Account Number : 110432003053  
Phone : (561)694-8107  
Fax Number : (561)694-1639

**\*\*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**

**Vette Works Inc.**

Certificate of Status	1
Certified Copy	1
Page Count	01
Estimated Charge	\$87.50

**FILED**  
2018 OCT -4 PM 4:43  
SECRETARY OF STATE  
TALLAHASSEE, FL

**ORIGINAL DATE 10/2/18**

**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: VETTE WORKS INC.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

5823 49th Street N

St. Petersburg Florida 33709

Mailing address, if different is:

5823 49th Street N

St. Petersburg Florida 33709

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: AUTO RESTORATION SEOP

**ARTICLE IV SHARES**

The number of shares of stock is: 200

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: SERGIO FERNANDEZ

Address 5823 49TH STREET N

St. Petersburg Florida 33709

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

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: SERGIO FERNANDEZ  
Address: 5823 49TH STREET N  
St. Petersburg Florida 33709

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: SERGIO FERNANDEZ  
Address: 5823 49TH STREET N  
St. Petersburg Florida 33709

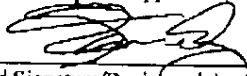
**ARTICLE VIII EFFECTIVE DATE:**

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

10/1/2018

\_\_\_\_\_  
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

10/1/2018

\_\_\_\_\_  
Date