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Florida Department of State
Division of Corporations
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FLORIDA PROFIT/NON PROFIT CORPORATION
TAURO AUTO SALES, INC

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

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STATE OF FLORIDA
DIVISION OF CORPORATIONS

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K. PAGE

APR 10 2019

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

ARTICLE I NAME TAURO AUTO SALES, INC

The name of the corporation shall be: _____

ARTICLE II PRINCIPAL OFFICEPrincipal street address

Mailing address, if different is: _____

1504 BARCELONA WAY

WESTON, FL 33327

1504 BARCELONA WAY

WESTON, FL 33327

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: _____

ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: P: RICARDO QUERO

Name and Title: _____

Address 1504 BARCELONA WAY

Address: _____

WESTON, FL 33327

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

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: RICARDO QUERO
Address: 1504 BARCELONA WAY
WESTON, FL 33327

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: RICARDO QUERO
Address: 1504 BARCELONA WAY
WESTON, FL 33327

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 04/08/2019 (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

04/08/2019

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

04/08/2019

Date