

P190000060889

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Incorporating Services, Ltd.

1540 Glenway Drive
Tallahassee, FL 32301
850.656.7956
Fax: 850.656.7953
www.Incserv.com
e-mail: accounting@incserv.com

ORDER FORM

TO Florida Department of State
Division of Corporations, Clifton
Building
2661 Executive Center Circle
Tallahassee, FL 32301
corphelp@dos.myflorida.com
850-245-6051

FROM Melissa Stops
mstops@incserv.com
850.656.7953

REQUEST DATE 8/2/2019 **PRIORITY** Routine

OUR REF # (Order ID#) 760437

ORDER ENTITY

LITHIA FLORIDA HOLDING, INC.

PLEASE PERFORM THE FOLLOWING SERVICES:

LITHIA FLORIDA HOLDING, INC. (FL)

New corp filing

NOTES:

\$70.00 Authorized

Email address for annual report reminders: Shawn.Linan@unisearch.com

RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: 120050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,



Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

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OUR REF # (Order ID#) 760437

ORDER ENTITY

LITHIA FLORIDA HOLDING, INC.

PLEASE PERFORM THE FOLLOWING SERVICES:
LITHIA FLORIDA HOLDING, INC. (FL)

New corp filing

NOTES:

\$125.00 Authorized - Please honor the original submission date as the file date.¹
Email address for annual report reminders: Shawn.Linan@unisearch.com

RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: I20050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,



Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

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: Lithia Florida Holding, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address
150 N. Bartlett St.
Medford, OR 97501

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Any lawful purpose

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Bryan B. DeBoer Director
Address: 150 N. Bartlett St.
Medford, OR 97501

Name and Title: Christopher S. Holzshu Director
Address: 150 N. Bartlett St.
Medford, OR 97501

Name and Title: Bryan B. DeBoer President
Address: 150 N. Bartlett St.
Medford, OR 97501

Name and Title: Christopher S. Holzshu
Address: Treasurer and Secretary
150 N. Bartlett St.
Medford, OR 97501

Name and Title: Tina Miller Assistant Secretary
Address: 150 N. Bartlett St.
Medford, OR 97501

Name and Title: Edward Impert Assistant Secretary
Address: 150 N. Bartlett St.
Medford, OR 97501

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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: NRAI Services, Inc.
Address: 1200 South Pine Island Road
Plantation, FL 33324

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Terrence Ehlers
Address: 101 S. Capitol Blvd, Suite 1900
Boise, ID 83702

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

NRAI Services, Inc.
by: Shari Stoutenburg Shari Stoutenburg, Asst. Sec. 8/1/2019
Required Signature/Registered Agent 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.

Terrence Ehlers 8/1/2019
Required Signature/Incorporator Date

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CLERK OF THE COURT
JULIA A. STOUTENBURG