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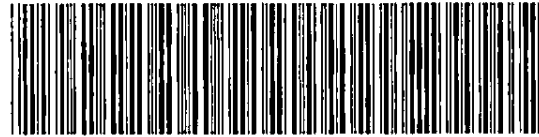
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2019 NOV -6 PM 12:03
FILED
TALLAHASSEE, FL 32301

FILED
2019 NOV -6 PM 1:05
CLERK OF STATE
TALLAHASSEE, FL 32301

COVER LETTER

Department of State
New Filing Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: GUARANTEED APPROVAL AUTO SALES INC
(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☒ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: ALMUTASEMBELLAH JUBRAN
Name (Printed or typed)
2754 W TENNESSEE ST
Address
TALLAHASSEE, FL 32304
City, State & Zip
850-508-8119
Daytime Telephone number
DCS10343@GMAIL.COM
E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

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

ARTICLE I NAME GUARANTEED APPROVAL AUTO SALES INC
The name of the corporation shall be: _____

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

2754 W TENNESSEE ST

TALLAHASSEE, FL 32304

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: PROFIT

ARTICLE IV SHARES 1000
The number of shares of stock is: _____

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: ALMUTASEMBELLAH JUBRAN, PRES

Address: 3810 BUCKLAKE ROAD APT G719
TALLAHASSEE, FL 32317

Name and Title: SANA JUBRAN, TREASURER

Address: 10545 VALENTINE ROAD
TALLAHASSEE, FL 32317

Name and Title: AMAL SARAMA, VICE PRESIDENT

Address: 2952 COMPTON WAY
TALLAHASSEE, FL 32317

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

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CLERK OF STATE
TALLAHASSEE, FLORIDA

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: ALMUTASEMBELLAH JUBRAN
Address: 3810 BUCKLAKE ROAD APT G719
TALLAHASSEE, FL 32317

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: ALMUTASEMBELLAH JUBRAN
Address: 3810 BUCKLAKE ROAD APT G719
TALLAHASSEE, FL 32317

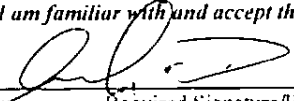
ARTICLE VIII EFFECTIVE DATE:

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.)

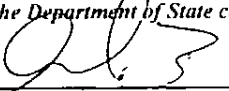
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

11-6-2019
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

11-6-2019
Date