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### **COVER LETTER**

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

SUBJECT: <u></u>	1 Auto Sales of PROPOSED CORPOR	FORT MYPES :	DOC.
Enclosed are an origi	nal and one (1) copy of the ar	ticles of incorporation and	a check for:
\$570.00 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	
		<u> </u>	<u>-</u>

FROM: C+CAuto SALS of feet Myers, Inc.

Name (Printed or typed)

2335 Crystal Dr. # 10

Address

Foet Myers FL 33907

City, State & Zip

239-940-6565

Daytime Telephone number

Senaida 726 & Yahoo. Com

E-mail address: (to be used for future annual report notification)

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

## C & C AUTO SALES OF FT MYERS, INC 2335-10 CRYSTAL DR FORT MYERS, FL 33907 239-940-6565

# **Affidavit**

Date: 11/12/2020

The enclosed application is in fact the same corporation and same person as Document # P97000075829. As per the application we are requesting a new corporation to be active with one minor change which is adding the secretary of the corporation.

Should you have any questions, please feel free to call the secretary mentioned at:

Senaida Canales 239-822-6691

Under penalties of perjury, I declare that I have read the foregoing document and that the facts stated in it are true and correct.

Adam Canales, President

#### 2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000075829

Entity Name: C & C AUTO SALES OF FORT MYERS, INC.

FILED
Apr 19, 2019
Secretary of State
8858987145CC

### **Current Principal Place of Business:**

2335 CRYSTAL DR

#10

FORT MYERS, FL 33907-4150

#### **Current Mailing Address:**

8624 EAST PARK CIRCLE FORT MYERS, FL 33907-4150 US

FEI Number: 65-0791453

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

CANALES, ADAM JR. 8624 E PARK CIRC FT MYERS, FL 37907 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: ADAM CANALES JR

04/19/2019

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail:

Title

**PVST** 

Name

CANALES, ADAM

Address

8624 EAST PARK STREET

City-State-Zip: FORT MYERS FL 33907-4150

hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under with; that if am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Flonda Statutes; and that my name appears bove, or on an attachment with all other tike empowered.

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

The name of the corporation:	shall be CAC Awo Sa	les of FORT My	as Enc.
ARTICLE II PRINCIPA	L OFFICE	Mailinu	address, if different is:
	· —		EARL PARK Cis
2335 C145+A	_		
FORT MYERS	FL 33907	FORT MYE	15, KJ 33507
ARTICLE III PURPOSE	orporation is organized is: $\sqrt{\ell}$	hindo Donl	00
The purpose for which the co	orporation is organized is:	MOIO GALL	
		<del></del>	
	<del>.</del>		
ARTICLE IV SHARES The number of shares of stock	k is:_ <i>100</i>		
ARTICLE V INITIAL O	FFICERS AND/OR DIRECTORS	i	
Name and Title:	dam CANAKS,	Name and Title	
9/	24 East PARK Cir	y v > Name and Time	· · ·
F	bet Myers, fl 339		
	1 / / /20	C Level	202
Name and Title:	enaida CANALES	Name and Title:	70 HOV
Address 2	330 FloRA Are	Address:	<u>¥</u>
E	oct Myers, 6/33	907	7
	, ,		7
Name and Title:		Name and Title:	<u> </u>
Address		Address:	<del></del>
		<del></del>	. <u> </u>

Name and Title:	Name and Title:
Address	
ARTICLE VI REGISTERED AGENT  The name and Florida street address (P.O. Box NOT acceptable)	e) of the registered agent is:
Name: Adam Canales JR	
Address: 8624 EAST JANK CIR	
Address: 8624 EAST PART CIR Ft. Myols F133507	207
	2020 NOV 17
ARTICLE VII INCORPORATOR	<u>-</u>
The <u>name and address</u> of the Incorporator is:	
Name: SENAIDA (ANALE	<u>S</u>
Address: 2330 Flura Are	03
Fat myors, El 33	507
ARTICLE VIII EFFECTIVE DATE:	
Effective date, if other than the date of filing: //2 (If an effective date is listed, the date must be specific and ca	2 /20 20 . (OPTIONAL) annot be more than five days prior or 90 days after
filing.)	
Note: If the date inserted in this block does not meet the applie	
the document's effective date on the Department of State's reco	ords.
Having been named as registered agent to accept service of proc certificate. Lam familiar with and accept the appointment as reg	ess for the above stated corporation at the place designa
crasic de la sum juminius with und decept the appointment as reg	
Required Signature/Registered Agent	Daie
I submit this document and affirm that the facts stated herein	are true. I am aware that the false information subn
document to the Department of State constitutes a third degree f	
Suads Johales	4 /2- /20