

P2 10000 99247

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

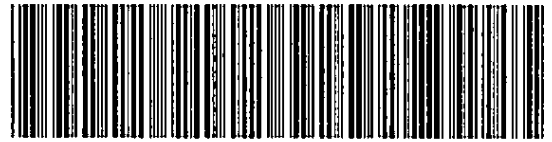
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NOV 23 2021



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COVER LETTER

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

SUBJECT: Space Coast Auto Supply - Domestication

Enclosed is an original and one (1) copy of the Articles of Domestication and a check:

FEES:

Certificate of Domestication	\$ 50.00
Articles of Incorporation and Certified Copy	<u>\$ 78.75</u>
Total filing fee	\$128.75

OPTIONAL:

~~Certificate of Status~~ ~~\$ 8.75~~

From: Dan Dvorak

Name (printed or typed)

4 N Cocoa Blvd

Address

Cocoa, FL 32922

City, State & Zip

321-795-3196

Daytime Telephone Number

dan@spacecoastnapa.com

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

The undersigned, Dan Dvorak CEO
(Name) (Title)
of Space Coast Auto Supply, Inc.
a foreign
corporation, in accordance with s. 607.11922, Florida Statutes, submit these Articles of
Domestication.

- I certify I am authorized to sign these Articles of Domestication on behalf of the corporation.

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ARTICLES OF INCORPORATION
IN COMPLIANCE WITH CHAPTER 607, F.S.

ARTICLE I NAME

THE NAME OF THE CORPORATION SHALL BE:

Space Coast Auto Supply, Inc.

ARTICLE II PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS/ MAILING ADDRESS IS:

Principal Address

4 N Cocoa Blvd

Cocoa, FL 32922

Mailing Address

4 N Cocoa Blvd

Cocoa, FL 32922

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ARTICLE III PURPOSE

THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED:

Any and all lawful business

ARTICLE IV SHARES

THE NUMBER OF SHARES OF STOCK IS: 1000

ARTICLE VI REGISTERED AGENT AND STREET ADDRESS

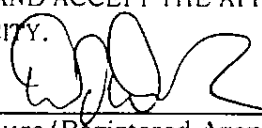
THE **NAME AND FLORIDA STREET ADDRESS** (P.O. BOX **NOT** ACCEPTABLE) OF THE REGISTERED AGENT IS:

Dan Dvorak

4 N Cocoa Blvd

Cocoa, FL 32922

HAVING BEEN NAMED AS REGISTERED AGENT AND 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.


Signature/Registered Agent

11/10/2021
Date

ARTICLE V DIRECTORS AND/ OR OFFICERS

THE NAME(S) AND ADDRESS(ES) AND SPECIFIC TITLES:

Dan Dvorak, CEO

Name & Title: _____

4 N Cocoa Blvd

Address: _____

Cocoa, FL 32922

Name & Title: _____

Address: _____

Name & Title: _____

Dan Dvorak, Secretary

4 N Cocoa Blvd

Address: _____

Cocoa, FL 32922

Name & Title: _____

Address: _____

Name & Title: _____

Amy Dvorak, CFO

4 N Cocoa Blvd

Address: _____

Cocoa, FL 32922

Name & Title: _____

Address: _____

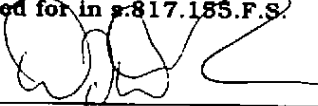
Name & Title: _____

Address: _____

Name & Title: _____

Address: _____

I submit this document and affirm that the facts stated herein are true. I am aware that 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.



Signature/Authorized Person

11/10/2021

Date