

1/11/23, 12:42 PM

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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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((H23000013756 3))



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To:
Division of Corporations
Fax Number : (850)617-6381

From:
Account Name : DOSSANTOS AND MACHADO, LLC
Account Number : I20140000089
Phone : (754)301-2128
Fax Number : (954)252-4650

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: INFO@GFSTAXACCT.COM

**FLORIDA PROFIT/NON PROFIT CORPORATION
RODRIGUES AUTO REPAIR CORP**

Certificate of Status	1
Certified Copy	0
Page Count	01
Estimated Charge	\$78.75

2023 JAN 11 PM 1:11

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COVER LETTER

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

SUBJECT: RODRIGUES AUTO REPAIR CORP
(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: GILVAM F DOS SANTOS
Name (Printed or typed)
11764 W SAMPLE RD STE 102
Address
CORAL SPRINGS FL 33065
City, State & Zip
754-301-2128
Daytime Telephone number
INFO@GESTAXACCT.COM
E-mail address: (to be used for future annual report notification)

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

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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: RODRIGUES AUTO REPAIR CORP

ARTICLE II PRINCIPAL OFFICE

Principal street address:
51 NW 45TH AVE APT 105
DEERFIELD BEACH, FL 33442

Mailing address, if different is:
51 NW 45TH AVE APT 105
DEERFIELD BEACH, FL 33442

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: AUTO REPAIR SERVICES

ARTICLE IV SHARES

The number of shares of stock is: 1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: EDERSON NEVES RODRIGUES SOUZA - PRESIDENT Name and Title: _____

Address: 51 NW 45TH AVE APT 105 Address: _____
DEERFIELD BEACH FL 33442

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

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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: EDERSON NEVES RODRIGUES SOUZA
 Address: 51 NW 45TH AVE APT 105
DEERFIELD BEACH FL 33442

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: EDERSON NEVES RODRIGUES SOUZA
 Address: 51 NW 45TH AVE APT 105
DEERFIELD BEACH FL 33442

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

Ederson Neves Rodrigues Souza 01/10/23
 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.

Ederson Neves Rodrigues Souza 01/10/23
 Required Signature/Incorporator Date