

Jul 21, 2023 2:53 PM
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No. 0004 E. 1

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

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

From:

Account Name : ATESIANO TAX SERVICES
Account Number : 120190800123
Phone : (305)928-1137
Fax Number : (786)349-4952

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

Email Address: luciegarcia91@yahoo.com

RECEIVED

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Division of
State

FLORIDA PROFIT/NON PROFIT CORPORATION
SUNSHINE AUTO TRANSPORT CORP

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$70.00

SECRETARY OF STATE
TALLAHASSEE, FL

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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: SUNSHINE AUTO TRANSPORT CORP

ARTICLE II PRINCIPAL OFFICE

Principal street address

3747 66TH AVE NE
NAPLES, FL 34120

Mailing address, if different is:

3747 66TH AVE NE
NAPLES, FL 34120

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Any and all lawful business

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: LESLIE GARCIA, PRESIDENT

Address 3747 66TH AVE NE
NAPLES, FL 34120

Name and Title: _____

Address: _____

Name and Title: _____

Address _____

Name and Title: _____

Address: _____

Name and Title: _____

Address _____

Name and Title: _____

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: LESLIE GARCIA

Address: 3747 66TH AVE NE

NAPLES, FL 34120

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: LESLIE GARCIA

Address: 3747 66TH AVE NE

NAPLES, FL 34120

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.

Leslie Garcia
Required Signature/Registered Agent

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.

Leslie Garcia
Required Signature/Incorporator

Date

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STATE OF FLORIDA
07/18/2023