

P2500000099

Florida Department of State
Division of Corporations
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Division of Corporations
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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
Auto Expert Solutions Inc.

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$78.75

RECEIVED

2024 DEC 30 PM 1:32

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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: Auto Expert Solutions Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

7320 East Fletcher Avenue

Tampa FL 33637

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Automotive Repairs & Any Lawful Activity

ARTICLE IV SHARES

The number of shares of stock is: 200 NPV

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Rhonda El Shatanofy, President Name and Title:

Address 7320 East Fletcher Avenue Address:

Tampa FL 33637

Name and Title: Name and Title:

Address Address:

Name and Title: Name and Title:

Address Address:

2024 DEC 30 PM 8:19

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: Rhonda El Shatanofy _____

Address: 7320 East Fletcher Avenue _____

Tampa FL 33637 _____

ARTICLE VII INCORPORATORThe **name and address** of the Incorporator is:

Name: Rhonda El Shatanofy _____

Address: 7320 East Fletcher Avenue _____

Tampa FL 33637 _____

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.*/s/ Rhonda El Shatanofy _____
Required Signature/Registered Agent12/13/2024 _____
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.*/s/ Rhonda El Shatanofy _____
Required Signature/Incorporator12/13/2024 _____
Date