

# P96000021399

Requestor's Name  
Address  
City/State/Zip  
Phone #

Office Use Only

**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

1. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)
2. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)
3. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)
4. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)

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96 MAR -8 PM 2:16  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

- ☐ Walk in ☐ Pick up time \_\_\_\_\_ ☐ Certified Copy  
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

100001737421  
03/08/96 -01089--002  
\*\*\*\*122.50 \*\*\*\*122.50

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

will wait  
4/10/96  
3/28/96

DIVISION OF CORPORATIONS  
DEPARTMENT OF STATE  
P.O. BOX 6327  
TALLAHASSEE FL. 32314.

DATE

3-5-96

FILED  
96 MAR -8 PM 12:16  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DEAR SIR /MADAM ,

ENCLOSED PLEASE FIND ARTICLES OF INCORPORATIONS FOR C.V. JOINTS FOR  
LESS INC. ALONG WITH A COPY PLUS A CHECK , IN THE AMOUNT OF \$122.50. THE  
DOLLARS AS DESCRIBED ARE FOR THE FILING FEES AND DESIGNATION OF  
REGISTERED AGENT WHOSE NAME IS VILMA GONZALEZ.

ALSO, I HAVE ENCLOSED TWO COPIES OF THE ARTICLES. PLEASE RETURN ONE  
SET TO ME WITH THE FILING DATE STAMPED ON IT.

THANKS AND REGARDS,

RESPECTFULLY ,

  
VILMA GONZALES



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State

March 8, 1996

EVELYN THOMAS  
486 ALEXANDER STREET  
THOMASVILLE, FL

SUBJECT: C.V. JOINTS FOR LESS INC.  
Ref. Number: W96000005184

We have received your document for C.V. JOINTS FOR LESS INC. and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with a telephone number where you can be reached during working hours.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6933.

Dana Farmer  
Document Specialist

Letter Number: 196A00010483

**ARTICLES OF INCORPORATION  
OF  
C.V.JOINTS FOR LESS INC.**

**FILED**  
96 MAR -8 PM 12:1  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE ONE**

**THE NAME OF THE CORPORATION IS C.V. JOINTS FOR LESS INC.**

**ARTICLE TWO**

**THIS CORPORATION IS TO PROVIDE A BUSINESS ,WHEREIN, WE WILL PROVIDE  
AUTOMOBILE MAINTIANCE, BUILD AND REBUILD C.V. JOINTS. THE BUSINESS IF  
GRANTED CORPERATE STATUS MAY PROVIDE OTHER RELATED SERVICES AS THE  
BUSINESS MAY SEE FIT.**

**ARTICLE THREE**

**THE PERIOD OF DURATION IS - PERPETUALITY.**

**ARTICLE FOUR**

**THE AGGREGATE NUMBER OF SHARES WHICH THE CORPERATION SHALL HAVE THE  
AUTHORITY TO ISSUE ARE 2000 AT A PAR VALUE OF ONE DOLLAR EACH.**

**ARTICLE FIVE**

**THE CORPORATION WILL NOT COMMENCE ITS BUSINESS UNTIL IT HAS RECEIVED  
FOR THE ISSUANCE OF SHARES CONSIDERATION OF THE VALUE TWO THOUSAND  
DOLLARS.**

ARTICLE SIX

THE STREET ADDRESS OF ITS INITIAL OFFICE IS 549 N. GOLDENROD ROAD SUITE 9 ORLANDO FL. THE NAME OF THE INITIAL REGISTERED 'AGENT' IS VILMA GONZALES WHOM ADDRESS IS 6611 COCOS DR ORLANDO FL. 32807.

ARTICLE SEVEN

THE NUMBER OF DIRECTORS WHICH WILL CONSTITUTE THE BOARD OF DIRECTORS IS ONE. THE NAMES AND ADDRESSES OF THE PERSONS WHO WILL SERVE AS DIRECTORS ARE AS FOLLOWS ;

NAMES

VILMA GONZALEZ

ADDRESSES

6611 COCOS DR. ORLANDO FL.  
ORLANDO, FL

ARTICLE EIGHT

THE BOARD OF DIRECTORS SHALL HAVE THE POWER TO SET AND DEVELOP ITS BY-LAWS WITHOUT RESTRICTION OF THEIR POWERS CONFERRED BY STATUS.

ARTICLE NINE

THE NAME AND ADDRESS OF THE INCORPORATOR IS  
CARLTON THOMAS / Evelyn Thomas  
304 SO. O.B.T.  
ORLANDO FL. 32805

*Evelyn Thomas*

THE DUTIES AND POWERS OF THE INCORPORATOR SHALL CEASE ONCE THE BUSINESS IS GRANTED CORPORATE STATUS.

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**CERTIFICATE OF DESIGNATION OF REGISTERED  
AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 OR 617.0501, FLORIDA  
STATUTES, THE UNDERSIGNED CORPORATION, ORGANISED UNDER THE LAWS OF  
THE STATE OF FLORIDA SUBMITS THE FOLLOWING STATEMENTS IN DESIGNATING  
THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. THE NAME OF THE CORPORATION IS: C.V. JOINTS FOR LESS INC.

2. THE NAME AND ADDRESS OF THE REGISTERED AGENT AND OFFICE IS:

**VILMA GONZALEZ**  
(NAME)

**6611 COCOS DR. ORLANDO WAY**  
(P.O. BOX NOT ACCEPTABLE)

**ORLANDO, FL 32811**  
(CITY/STATE/ZIP)

HAVING BEEN NAMED AS REGISTERED AGENT TO ACCEPT SERVICE OF PROCESS  
FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS  
CERTIFICATE. I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND  
AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE  
PROVISIONS OF ALL SATUTES RELATING TO THE PROPER AND COMPLETE  
PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE  
OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

*Vilma Gonzalez*  
(SIGNATURE)

3-5-96  
(DATE)