

P970000 748/8

TRANSMITTAL LETTER

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

SUBJECT: CLASSIC ROLLS ROYCE SERVICES, INC.
(Proposed corporate name - must include suffix)

000002278180--1
-08/27/97--01043--007
*****78.75 *****78.75

Enclosed is an original and one(1) copy of the articles of incorporation and a check for

☐ \$70.00
Filing Fee

☒ \$78.75
Filing Fee
& Certificate

☐ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: KEVIN A. TATE
Name (Printed or typed)

2320 CLARK ST. UNIT 8+9
Address

APPOKA FL 32703
City, State & Zip

(407) 578-7626
Daytime Telephone number

FILED
97 AUG 27 AM 11:36
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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

T. Meyer AUG 28 1997

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ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

CLASSIC ROLLS ROYCE SERVICE, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

2320 CLARK ST. UNIT 8+9

APOKA, FL. 32703

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1,000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

KEVIN A. TIGTZ

2320 CLARK ST. UNIT 8+9

APOKA, FL. 32703

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

KEVIN A. TIGTZ

2320 CLARK ST. UNIT 8+9

APOKA, FL. 32703


Signature/Incorporator


Date

(An additional article must be added if an effective date is requested.)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certify date, 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 statutes 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.


Signature/Registered Agent


Date

DIVISION OF
TALLAHASSEE, FLORIDA

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