P9800086504

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

	Austin /	Notors Co.		
SUBJECT:		rate name - must include su		
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			-10/08/9801063003 *****87.50 *****87.50	
Enclosed is an origin	al and one(1) copy of the articles	s of incorporation and a	check for :	
		18.75	87.50	
\$70.00	\$78.75	□\$122.50	\$131.25	
Filing Fee	Filing Fee & Certificate	Filing Fee & Certified Copy	Filing Fee, Certified Copy	
	ac Cormicato	Co cordinad copy	& Certificate	
		ADDITIONAL CO	DPY REQUIRED	
FROM:		IN		
	Name (Pr	rinted or typed)		
1915 GUAVA Dr. Address Address				
Address				
	T. T.		ASSESSED ASSESSED	
	EDGEWATER F. City,	-LDRIDA 321	ARY OF STATE ASSEE, FLORID	
1 -	City,	State & Zip	FLST 8	
1001108	200,12 198 964-489-9388			
XYIV Q	Daytime Telephone number			
2 101.1				
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NOTE: Please provide the original and one copy of the articles.

FILED

ARTICLES OF INCORPORATION

98 OCT -8 AH 8: 56

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

SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE	7	NAME
AKIILLE		14511115

The name of the corporation shall be:

AUSTIN Motoes Co.

ARTICLE II PRINCIPAL OFFICE

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

1915 GUAVA Dr. EDGEWATER FL. 32141

ARTICLE III SHARES

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

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Julie Austin 1915 GUAVA Dr.

EDGEWATER FLORIDA 32141

ARTICLE V INCORPORATOR

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

Julie AUSTIN

1915 GUAVA Dr.

EDBEWAter FLORIDA B2141

Signature/Incorporator

(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 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 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