

P00000024105
TRANSMITTAL LETTER

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

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-03/02/00--01080-001
*****78.75 *****78.75

SUBJECT: ECLIPSE AUTO TINTING & ACCESSORIES INC
(Proposed corporate name - must include suffix)

FILED
00 MAR - 2 AM 8:09
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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

FROM: CLIFFORD PHILLIPS
Name (printed or typed)
1406 PINE RIDGE ROAD
Address
NAPLES, FLORIDA 34108
City, State & Zip
941-262-4255
Daytime Telephone number

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

FILED
00 MAR -2 AM 8:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION

ECLIPSE AUTO TINTING & ACCESSORIES

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

ARTICLE I NAME

The name of the corporation shall be:

ECLIPSE AUTO TINTING & ACCESSORIES INC.

ARTICLE II PRINCIPAL OFFICE

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

1406 PINE RIDGE ROAD
NAPLES, FLORIDA 34108

ARTICLE III SHARES

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

5000 SHARES - NO PAR COMMON

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

CLIFFORD PHILLIPS
2255 GREENBACK CIRCLE
NAPLES, FLORIDA 34112

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

CLIFFORD PHILLIPS
2255 GREENBACK CIRCLE
NAPLES, FLORIDA 34112

CAROL PHILLIPS
2255 GREENBACK CIRCLE
NAPLES, FLORIDA 34112

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

1st day of MARCH, 2000.

Clifford E Phillips
Signature

[Signature]
Signature

Signature

FILED
00 MAR -2 AM 8:10
TALLAHASSEE STATE
OFFICE OF 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, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: ECLIPSE AUTO TINTING
& ACCESSORIES INC.

2. The name and address of the registered agent and office is:

CLIFFORD PHILLIPS
(Name)
1406 PINE RIDGE ROAD
(P.O. Box not acceptable)
NAPLES, FLORIDA 34108
(City/State/Zip)

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.

Clifford E Phillips
(Signature)

00-01-00
(Date)