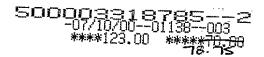
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TRANSMITTAL LETTER

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



SUBJECT:	Perfection A	ato Sales	, Inc.				
	(Proposed co	orporate i	name)	· · · · · · · · · · · · · · · · · · ·			
Enclosed is an or incorporation and	riginal and on lour check fo	ne (1) cop or \$	py of the	articles	of		
FROM:	Perfection A	ıto Sales	Inc.				
	Name (Prin	ted or Ty	oed)			90 A	
	2061 1	W 27 AVE			100	00 AUG 10 NM 9: 08	FILED
	Ado	iress		•	SSEE, F		0
`	Miami,	F1. 33142	2		FLORIDA	9: 08	
	City, Stat	te & Zip (ode		-		
	(305)	638-3038					
	Telephor	ne Number	•				

Note: Please provide the original and one copy of the Articles.



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

August 7, 2000

PERFECTION AUTO SALES 2061 NW 27 AVE MIAMI, FL 33142

SUBJECT: PERFECTION AUTO SALES, INC.

Ref. Number: W00000017547

We have received your document for PERFECTION AUTO SALES, INC. and your check(s) totaling \$123.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent and street address must be consistent wherever it appears in your document.

The principal office must be consistent wherever it appears in your document

Please return the original and one copy of 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 (850) 487-6928.

Tim Burch Document Specialist

Letter Number: 200A00042498



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

July 13, 2000

PERFECTION AUTO SALES 2061 NW 27 AVE MIAMI, FL 33142

SUBJECT: PERFECTION AUTO SALES, INC.

Ref. Number: W00000017547

We have received your document for PERFECTION AUTO SALES, INC. and your check(s) totaling \$123.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return the original and one copy of 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 (850) 487-6928.

Tim Burch Document Specialist

Letter Number: 200A00038547

FILEU ...

00 AUG 10 AH 9: 08

TALLAHASSEE FLORIDA

ARTICLES OF INCORPORATION

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:

Perfection Auto Sales, Inc.

ARTICLE II PRINCIPAL OFFICE

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

2061 NW 27 AVE Miami, Fl. 33142

ARTICLE III SHARES

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

100 Shares @ \$1.00 par value

ARTICLE IV INITIAL REGISTRED AGENT AND STREET ADDRESS The name and addres of the initial registered agent is:

Jocelyn Pimentel 2061 NW 27 AVE Miami, Fl. 33142

ARTICLE V INCORPORATOR (S)

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

Jocelyn Pimentel 2061 NW 27 AVE Miami, Fl. 33142

President / Secretary

Maria C. Mazo 9020 NW. 8 St. #516 Miami, Fl. 33172

Vice-President

The undersigned incorporator(s) has (have) executed these Articles of Incorporation this 30 day of June 2000

Signature

Signature

Signature

FILED

00 AUG 10 AM 9:08

CERTIFICARE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

TALLAHASSEE, FLORIDA

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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.

mb o	n 2 m 0	of the	COMPON	ation i		ection A	uto	pares,	IIIC.
1116	name	OI the	COLPOR	401011 1	<u></u>				
						2061 NW Miami,			•
						(Addı	ress)	
			1 4 4 4						
2.	The	name a	nd addr	ess of	the re	gistered	age	ent and	office
						Jos	elyı	n Pimeni	tel
			• • •	•			Name	e)	
						2061	NW	27 Ave	
				(P.O. B	ox or	Mail Dro	p NC	OT acce	table)
						Mia	mi,	F1. 331	L42
				•		(C	ity,	/State/2	zip)

Having been named as registered agent and to accept service of process for the above stated corporation at the 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 perfomance of my dities, and I am familiar with and accept the obligations of my position as registered agent.

(STONATIONE)

(DATE)

DIVISION OF CORPORATIONS, P.O.BOX 6327, TALLAHASSEE, FL.33214