

TRANSMITTAL LETTER

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APPROVED AND FILED

02 MAR -4 PM 3:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

SUBJECT: "CAPITAL AUTO TRANSPORT & RECOVERY SERVICE"
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

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 of Status

\$78.75
Filing Fee
& Certified Copy

\$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: JUAN J. FLORES
Name (Printed or typed)

2740 SPRINGFOREST ROAD
Address

TALLAHASSEE FLORIDA 32301
City, State & Zip

(850) 709 8048
Daytime Telephone number

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

02 MAR -4 PM 3:19

RECEIVED

400005042224--1
-03/05/02--01004--001
*****79.00 *****78.75

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

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

CAPITAL AUTO TRANSPORT & RECOVERY SERVICE *Inc.*

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ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

2740 SPRINGFOREST ROAD
TALLAHASSEE FLORIDA 32301

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO ESTABLISH A LEGAL LICENSED ENTITY FOR PURPOSE OF
AUTOMOTIVE TRANSPORTATION AND RECOVERY

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

JAUN J. FLORES PRESIDENT
 TREASURER
 SECRETARY

Cris Flores V.P.

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

JUAN Flores
2740 SPRINFOREST ROAD
TALLAHASSEE FLORIDA 32301

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

JAUN J. FLORES
2740 SPRINGFOREST ROAD
TALLAHASSEE FLORIDA 32301

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Juan J. Flores

Signature/Registered Agent

3-4-2002

Date

Juan J. Flores

Signature/Incorporator

3-4-2002

Date