

OFFICE USE ONLY

PARUS CORPORATE FILING SERVICE, INC.

(Requestor's Name)

3320 S.W. 87th AVENUE

(Address)

MIAMI, FLORIDA (305) 552-5973

(City, State, Zip) (Phone #)

LOCAL REPRESENTATIVE TALLAHASSEE

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. BEST AUTO CARE INC.
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

☒ Walk in ☒ Pick up time 2:00
☐ Mail out ☐ Will wait ☐ Photocopy

☐ Certified Copy
☐ Certificate of Status

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
	NonProfit
	Limited Liability
	Domestication
	Other

AMENDMENTS	
	Amendment
	Resignation of R.A., Officer/Director
	Change of Registered Agent
	Dissolution/Withdrawal
	Merger

OTHER FILINGS	
	Annual Report
	Fictitious Name
	Name Reservation

REGISTRATION/ QUALIFICATION	
	Foreign
	Limited Partnership
	Reinstatement
	Trademark
	Other

500003109865--5
-01/25/00--01052--003
*****78.75 *****78.75

Examiner's Initials

ARTICLES OF INCORPORATION

OF

The undersigned subscribers to these articles of Incorporation known to be natural persons competent to contract, hereby organize and incorporate a corporation under the laws of the State of Florida.

ARTICLE I. NAME

The name of the Corporation is:

BEST AUTO CARE INC.

ARTICLE II. NATURE OF BUSINESS

The corporation may engage in any activity or business permitted under the laws of the United State and of this State.

ARTICLE III. CAPITAL STOCK

The maximum number of shares of stock that this corporation is authorized to have outstanding at any one time is 750 shares of common stock having a nominal or par value of \$ 10.00 per share.

ARTICLE IV. INITIAL CAPITAL

The amount of capital with which this corporation will begin business is: \$ 7500.00

ARTICLE V. TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE VI. ADDRESS

The initial post office address of the principal office of this corporation in the State of Florida is 9375 SW 40 St. MIAMI, FL 33165

The Board of Directors may from time to time move the principal office to any other address.

ARTICLE VII. DIRECTORS

This corporation shall have 2 Directors initially. The number of directors may be increased or diminished from time to time.

SECRETARY OF STATE
TALLAHASSEE FLORIDA

00 JAN 25 PM 1:10

FILED

or not so interested.

ARTICLE VIII. INITIAL OFFICERS AND DIRECTORS

The name and post office addresses of the number of the first Board of Directors are:

RAUL LEYVA JR. 9375 SW 40 ST, MIAMI, FL 33165

MIRTA LEYVA 9375 SW 40 ST, MIAMI, FL 33165

The initial officers of this Corporation are:

RAUL LEYVA JR. 50 SHARES

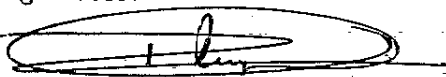
MIRTA LEYVA 50 SHARES

ARTICLE IX. AMENDMENTS

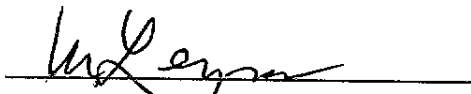
These Articles of Incorporation may be amended in the manner provided by law. Every amendment shall be approved by the board of Directors, proposed by it to the stockholders and approved at the stockholders' meeting by a majority of the stock entitled to vote thereon, unless all directors and all the stockholders sign a written statement manifesting their intention that a certain amendment of these Articles of Incorporation be made.

IN WITNESS THEREOF, the undersigned have hereunto set their hands and seal and have acknowledged and filed in the office of the Secretary of State of Florida as subscribers of the foregoing Articles of Incorporation this 24 day of January 2000

Signatures:



RAUL LEYVA JR.



MIRTA LEYVA

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.325, 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.

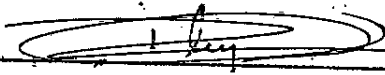
1. THE NAME OF THE CORPORATION IS: BEST AUTO CARE INC.
2. THE NAME AND ADDRESS OF THE REGISTERED AGENT AND OFFICE IS:
RAUL LEYVA 9375 SW 40 ST
(P.O. BOX NOT ACCEPTABLE)
MIAMI, FL 33165
(CITY/STATE/ZIP)

SIGNATURE 
(CORPORATE OFFICER)

TITLE DIRECTOR

DATE JANUARY 24, 2000

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE
STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE
I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO
COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE
PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE
DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES.

SIGNATURE 

DATE JANUARY 24, 2000

REGISTERED AGENT FILING FEE

FILED
00 JAN 25 PM 1:10
SECRETARY OF STATE
TALLAHASSEE FLORIDA