TRANSMITTAL LETTER

P00000002270

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

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SUBJECT: ALPHA AUTO SALES, INC.

(Proposed corporate name - must include suffix)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for:

FROM: KAUL VEITIA

Name (Printed or typed)

8100 WEST OKEECHOBEE RD

Address

HIALEAH GARDENS, FL 33016 City, State & Zip

305-445-7335 Daytime Telephone number FILED

2000 FEB 25 PM 2: 23

SECRETARY OF STATE
TALL AHASSEF FIGURE

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

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ARTICLES OF INCORPORATION	FILED		
The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.	2800 FEB 25 PM 2: 2:		
ARTICLE I NAME	SECRETARY OF STATE TALLAHASSEE, FLORID		
The name of the corporation shall be:			
ALPHA AUTO SALES, INC.			
ARTICLE II PRINCIPAL OFFICE			
The principal place of business and mailing address of this corporation shall be:			
8100 WEST OKEECHOBEE			

HIALEAH GARDENS,	FL 33016	·			
ARTICLE III SHARE	S.				
The number of shares of stock	that this corporation is a	uthorized to have or	itstanding at	any one ti	me is:
100 SILARE \$100	POR SHARE		_	•	
RAUL VEITIA 50	1% / José Co	to 50%			

INITIAL REGISTERED AGENT AND STREET ADDRESS

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

RAUL VEITIA (PRESIDENT) RAUL VEITIA 8100 WEST OKEECHOBEE POAD HIALEAH GARLENS, FL 33016 ARTICLE V INCORPORATOR

The <u>name and address</u> of the incorporator to these Articles of Incorporation are:

BIDD WEST OKEECHOSEE ROAD HIALEAH GARDENS FL 33016

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 signites relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of myposition as registered agent

Signature/Registered Agent

2: 23

LORIDA