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TRANSMITTAL LETTER

FILED  
00 APR 14 AM 10:02  
DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

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

200003209262--7  
-04/14/00--01048--018  
\*\*\*\*\*87.50 \*\*\*\*\*87.50

SUBJECT: Exotic Truck & Car Accessories, Inc.  
(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: Yamil Garcia  
Name (Printed or typed)

7150 West 2nd Way  
Address

Hialeah, Fl 33012  
City, State & Zip

(305) 978-4676  
Daytime Telephone number

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

D. BROWN APR 20 2000

**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: Exotic Truck & Car Accessories, Inc.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is: 7370 NW 36 Street, Suite 319A  
Miami, FL 33166

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: to resale, retail, truck and car accessories and parts to the public.

**ARTICLE IV SHARES**

The number of shares of stock is: 1000.

**ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)**

The name(s) and address(es): Yamil Garcia  
7150 West 2nd Way  
Hialeah, FL 33012.

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address of the registered agent is: Yamil Garcia  
7150 West 2nd Way  
Hialeah, FL 33012

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is: Yamil Garcia  
7150 West 2nd Way  
Hialeah, FL 33012

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*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*

  
\_\_\_\_\_  
Signature/Registered Agent

04/07/00  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

04/07/00  
\_\_\_\_\_  
Date

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA