

Florida Department of State

Division of Corporations
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To:

Division of Corporations

Fax Number

: (850)922-4001

From:

Account Name : FAS-T CORP. AGENTS, INC.

Account Number : 071001002335 Phone : (305)599-0839 Fax Number : (305)716-0346

FLORIDA PROFIT CORPORATION OR P.A.

TRANSMISSIONS R'US CARE INC.

Certificate of Status	0
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SECRÉTARY OF STATE DIVISION OF CORPORATIONS

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Corporate Filing

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ARTICLES OF INCORPORATION

TRANSMISSIONS R'US CARE INC.

the undersigned, acting incorporated, of a corporation to chapter 617, Florida Statutes, adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the incorporation shall be : TRANSMISSIONS R'US CARE INC. The principal place of business shall be: 7217 W 30th Ave. Hialeah, Fl 33018

ARTILE II NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

ATICLE III CAPITAL STOCK

The aggregate number of shares of stock and its value that this corporation is authorized to have outstanding at any one time is: Hundred Shares at \$1.00 each distribute as follow: **CARLOS FERNANDEZ 50% LUZ FERNANDEZ 50%**

ARTICLE IV TERM OF EXISTENCE This corporation is to exist perpetually.

ARTICLE V OFFICERS DIRECTORS

The names and street addresses of the initial officers and director, if any, who shall hold office the first year of the corporation existence or until their successor(s) is (are) elected, is (are) :

CARLOS FERNANDEZ

7217 W 30th AVE

Director

LUZ FERNANDEZ

HIALEAH, FL 33018 7217 W 30TH AVE

Assistant Director

Hialeah, Fl 33018

Prepared by: Barcos Accountant Phone (305)828-7034 Fax (305) 362-6125

ARTICLE VI INCORPORATOR (S)

The name and street address of the incorporate to this articles of incorporation is:

NAME CARLOS FERNANDEZ

ADDRESS 7117W 30TH AVE HIALEAH, FL 33018

IN WITNESS WHEREOF, The undersigned incorporated has executed these Articles of Incorporation in the City of Miami, State of Florida this 22 day of July, 1999.

__(Seal)

CARLOS FERNANDEZ
Incorporated

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) Name of the corporation:

TRANSMISSIONS R US CARE INC.

2) The name and address of the registered agent and office is:

7217 W 30TH AVE

HIALEAH, FL 33018

CARLOS FERNANDEZ

Signature____

Title DIRECTOR

Date: 6-14-00

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

CARLOS FERNANDEZ

GNATURE_

DATE: 6 -/ C/- 120