## TRANSMITTAL LETTER POOD OCC 6831 Department of State Division of Corporations

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

PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX) COMPANY				
Enclosed is an original	and one(1) copy of the article	50	00003326395	
Filing Fee	■ \$78.75 Filing Fee & Certificate of Status	Filing Fee & Certified Copy	- 1	
FROM:	Dave Will Name (Pri	II AMS nted or typed)	I 29 I 29	
R+1 Box 126-1 US Hay 90 8 8 10 CM				
<del></del>	850 3	F   3239 ate & Zip  342   480  ephone number	RECEIVED  O JUL 18 MIII-18  OARIMENT OF STATE STORPORATIONS OARIMASSEF, FLORIDA	

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

Will Wart

ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	
The name of the corporation shall be:  Daves Deisel-Auto Repair + Towing, Co.	
ARTICLE II PRINCIPAL OFFICE  The principal place of business/mailing address is:  Rt   Box 126-1  Montice 1/o F1 32344	
ARTICLE III PURPOSE  The purpose for which the corporation is organized is:  Acto + Truck Towns and Repair	
ARTICLE IV SHARES The number of shares of stock is:	
ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)	
The name(s) and address(es):	
ALLAHASSI 18	
ARTICLE VI REGISTERED AGENT  The name and Florida street address registered agent is:  Deve Withams Rt / Box 106-/ Monticello Fl 37344	
ARTICLE VII INCORPORATOR	
The name and address of the Incorporator is:	
Lynn Williams Rt 1 Box 126-1 montricello Fl 32344	
**************************************	
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in the certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity	tis

Signature/Registered Agent

Date

7-/8-00

Signature/Incorporator

Date