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Florida Department of State
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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.

LOW COST AUTO REPAIRS, INC.

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$78.75

**ARTICLES OF INCORPORATION
OF**

Low Cost Auto Repairs, Inc.

ARTICLE ONE

The name of the Corporation is Low Cost Auto Repairs, Inc.

ARTICLE TWO

The number of shares the corporation is allowed to issue is 1,000 with a 1.00 par value.

ARTICLE THREE

The street address of the initial registered office of the corporation is 4815 E. Busch Blvd., Suite 113, Tampa, FL 33617 and the registered agent is Joseph Janezic.

ARTICLE FOUR

The name and address of the incorporator is: Joseph Janezic, 4815 E. Busch Blvd., Suite 113 Tampa, FL 33617.

ARTICLE FIVE

The mailing address of the initial principle office of the corporation is 4815 E. Busch Blvd., Suite 113 Tampa, FL 33617.

IN WITNESS WHEREOF, the undersign has executed these Articles of Incorporation.



Signature of Incorporator

10-010-2000
Date

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TALLAHASSEE, FLORIDA

**CERTIFICATE OF DESIGNATION
REGISTERED AGENT / REGISTERED OFFICE**

Pursuant to the provision of section 607.0501, 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:

Low Cost Auto Repairs, Inc.

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

**Joseph Janezic
4815 E. Busch Blvd., Suite 113
Hillsborough County, Tampa, FL 33617**

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



Joseph Janezic

10-10-00
Date

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TALLAHASSEE, FLORIDA