

Florida Department of State  
Division of Corporations  
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Katherine Harris, Secretary of State

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To:

Division of Corporations  
Fax Number : (850) 922-4001

From:

Account Name : BUSINESS WORLD TRANSACTIONS, INC.  
Account Number : 104512000707  
Phone : (305) 266-4080  
Fax Number : (305) 264-0232

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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FLORIDA PROFIT CORPORATION OR P.A.

TOW ONE RECOVERY, CORP.

Certificate of Status	0
Certified Copy	0
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## ARTICLES OF INCORPORATION

*The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Act, hereby adopt(s) the following Articles of Incorporation.*

### ARTICLE I

#### NAME

The name of the corporation shall be TOW ONE RECOVERY, CORP.

### ARTICLE II

#### PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

3050 W. 11 AVE.  
HIALEAH, FL. 33012

### ARTICLE III

#### SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: One Thousand (1,000) shares of One Dollar (\$1.00) par value common stock, which shall be designated COMMON SHARES.

### ARTICLE IV

#### INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

RAMON A. BOUZA  
3050 W. 11 AVE.  
HIALEAH, FL. 33012

Prepared by: RAMON A. BOUZA  
3050 W. 11 AVE.  
HIALEAH, FL. 33012  
(305) 456-1643

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

PURSUANT TO THE PROVISIONS OF SECTION 617.0501, 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: TOW ONE RECOVERY, CORP.

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

RAMON A. BOUZA  
3050 W. 11 AVE.  
HIALEAH, FL. 33012

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TALLAHASSEE, FLORIDA

*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.*

Ramon A Bouza  
(SIGNATURE)

10-24-00  
(DATE)

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