POCOSITAL LETTER TRANSMITTAL LETTER OF TRAN

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

600003499876--9 -12/13/00--01073--004 *****70.00 ******70.00

High Tech Auto 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 [−]**□** \$78.75 □ \$78.75 □ \$87.50 Filing Fee Filing Fee Filing Fee Filing Fee, & Certificate of Status & Certified Copy Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED LES GARDI, CPA FROM: N706(P.SJETAMIAMI TRAIL SARASOTA, FL. 34231-5559 (941) 925-2099 Address City, State & Zip

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

Daytime Telephone number

(fia/19/00

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

FILED SECRETARY OF STATE CIVISIUM OF CORPORATIONS

00 DEC 13 AM 8:39

ARTICLE I NAME

The name of the corporation shall be:

High Tech Auto, Inc.

ARTICLE II PRINCIPAL OFFICE

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

5563 Magnolia Blossom Lane Sarasota, F1 34233

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1000 Shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

LES GARDI, CPA 7061 S. TAMIAMI TRAIL SARASOTA, FL. 34231-5559 (941) 925-2099

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Josif Joo 5563 Magnolia Blossom Lane Sarasota, FL 34233

gnature/Incorporator

Date

(An additional article must be added if an effective date is requested.)

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

Signature/Registered Agent

Date