TRANSMITTAL LETTER

P01000004206

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

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Enclosed is an original and one(1) copy of the articles of incorporation and a check for:									
S70.00 S78.75 Filing Fee Filing Fee & Certificate of Status	□\$78.75 Filing Fee & Certified Copy	☐ \$87.50 Filing Fee, Certified Copy & Certificate of							
	ADDITIONAL COPY	Status Y REQUIRED							
FROM: ANTONIA UNENA									
Name (Printed or typed) SECRETARY Address Name (Printed or typed) ALLAHASS Address Address									
1300) 788-0824	33/35 ate & Zip 81 643 - 68. Sphone number	AM II: 20 F STATE FLORIDA							

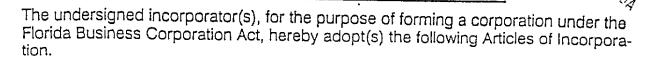
NOTE: Please provide the original and one copy of the articles.

Job III

ARTICLES OF INCORPORATION

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MIAMI AUTO BODY REPAIR, INC.



ARTICLE I NAME

The name of the corporation shall be: MIAMI AUTO BODY REPAIR, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be: 2738 NW 21 TERR.

MIAMI FL. 33142

ARTICLE III CAPITAL STOCK

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

500 shares of common stock having a par value of \$1.00 per share.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

EDWIN SERRANO 2903 NW 23 AVE MIAMI FL 33142

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

EDWIN SERRANO, president 2903 NW 23 AVE MIAMI FL. 33142

The undersigned inco	orporator(s	s) has(have) execut	ed these	Articles of In	corporation this
09	day of_	NOVEMBER	- 	2000	-
<u>els</u>		Signature	-		
		Signature	•		

Signature

Articles of Incorporation Filing Fee -

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 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.

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1.	The name of the corporation is: MIAMI AUTO BODY REPAIR, INC.						
_							
The name and address of the registered agent and office is:							
	7. S. Z.						
	EDWIN SERRANO						
	(Name) HAR JAN T						
	2903 NW 23 AVE						
	(P.O. Box not acceptable)						
	MIAMI FL 33142						
(City/State/Zip)							

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.

_	EBS_0	11/09/2000
•	(Signature)	(Date)