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FLORIDA DIVISION OF CORPORATIONS
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TO: DIVISION OF CORPORATIONS

FAX #: (850) 922-4001

FROM: EMPIRE CORPORATE KIT COMPANY

ACCT#: 072450003255

CONTACT: RAY STORMONT

PHONE: (305) 541-3694

FAX #: (305) 541-3770

NAME: COUNTYWIDE COLLISION CORP.

AUDIT NUMBER.....H01000020838

DOC TYPE.....FLORIDA PROFIT CORPORATION OR P.A.

CERT. OF STATUS..0

PAGES..... 4

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4010000 20838
ARTICLES OF INCORPORATION

OF

④
COUNTYWIDE COLLISION CORP

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

ARTICLE I NAME

The name of the corporation shall be:

COUNTYWIDE COLLISION CORP.

ARTICLE II PRINCIPAL OFFICE

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

6431 CORAL WAY
MIAMI, FL 33155-1948

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; \$ 1.00 PAR VALUE
ISSUED AS FOLLOWS:
JUSTINE JIMENEZ GARCIA - 500 SHARES
4640 SW 98 AVE
MIAMI, FL 33165

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

MARCOS A GUERRA
3663 SW 8TH STREET, STE 210
MIAMI, FL 33135

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ARTICLE V INCORPORATOR(S)

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

JUSTINE JIMENEZ - 500 SHARES, DIRECTOR, SECRETARY
4640 SW 98 TH AVE
MIAMI, FL 33165

ALEJANDRO GARCIA - DIRECTOR, PRESIDENT
4640 SW 98 TH AVE
MIAMI, FL 33165

ARTICLE VI PURPOSE

THE MAIN PURPOSE OF THE CORPORATION IS TO ENGAGE
IN THE BUSINESS OF AUTOMOBILE REPAIR AND BODY SHOP.

The undersigned has(have) executed these Articles of Incorporation this

23RD day of FEBRUARY, 2001.

Alejandro Garcia
Signature/Title
Alejandro Garcia - President

Justine Jimenez
Signature/Title
Justine Jimenez - Secretary

Signature/Title

STATE OF FLORIDA

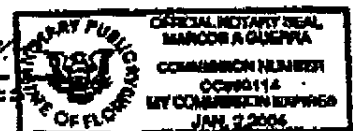
COUNTY OF DADE

THE FOREGOING INSTRUMENT WAS ACKNOWLEDGED AND SWORN TO BEFORE
ME THIS 23 DAY OF FEBRUARY, 2001 BY ALEJANDRO
GARCIA & Justine Jimenez OF COUNTYWIDE COLLISION CORP.

NOTARY PUBLIC.

Mario A. Guerra

My Commission Expires



#010000000000
CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions 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: _____

COUNTYWIDE COLLISION CORP

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

MARCOS A GUERRA
 (NAME)

3663 S.W. 8TH ST STE 210
 (P.O. BOX NOT ACCEPTABLE)

MIAMI, FL 33135
 (CITY/STATE/ZIP)

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 TALLAHASSEE, FLORIDA

SIGNATURE _____

(corporate officer)

TITLE _____

SECRETARY

DATE _____

02/23/01

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 _____

Marcos A. Guerra

DATE _____

2/23/01

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