POI OTRANSMITTAL LETTER 954

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



SUBJECT: \mathcal{H}	ONESTY AUTO (Proposed corpor	WRECKIN rate name - must include suf	a Towing	§ STORAGE
				Inc.
Enclosed is an origin	nal and one(1) copy of the article		300003767 -02/26/01- check for *****87.50	-0 ` N 4301 1
S70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	□\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status	
FROM:	Joachim Name (Pr	<u>.</u>		
	Oxlands	tant Circ ddress FL 328 State & Zip		
	(407) 40 Daytime Te	2 - 8772 lephone number	2	

F. CHESTER FEB 2 7 2000

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.

ARTICLE I NAME		
The name of the corporation shall be:		
HONESTY AUTO WRECKING, TOWING & S	stora-c	FE, INC.
ARTICLE II PRINCIPAL OFFICE		
The principal place of business and mailing address of this corporation shall be:		i.
7458 Radeant Circle		
Orlando, FL 32810		
ARTICLE III SHARES		
The number of shares of stock that this corporation is authorized to have outstanding at any or	ne time is:	
100 shares at \$1.00 per share		
doachim Salomon		
AKTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS		a.
The name and Florida street address of the initial registered agent are:	- 0	•
Joachim Salomon 1458 Radiant circle Orlando, FL 32810 ARTICLE V INCORPORATOR) I FEB 26 SECRETARY ALLAHASSE	FLED
he name and address of the incorporator to these Articles of Incorporation are:	<u> </u>	四
Joachim Salomon	AM II: 4	
7458 Radiant Circle	>" 0	-
Orlando, FL 32810		
100 fruchip 02-15	01	
Signature/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