

May 14, 2001

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

\*\*\*\*\*70.00 \*\*\*\*\*70.00

SUBJECT:

INCORPORATION OF

MD AUTO PERFECTION, INC.

Dear Secretary of State:

Enclosed find one original and a copy of the Articles of Corporation of MD AUTO **PERFECTION, INC.** and a check for:

X \$70.00

Filing Fee

\$78.75

Filing Fee

&Certificate

\$122.50

Filing Fee

& Certified Copy

\$131.25

Filing Fee, Certified Copy

& Certificate

## ADDITIONAL COPY REQUIRED

FROM:

Michele L. Boxer

Name (Printed or typed)

4803 N.W. 97 Avenue

Address

Sunrise, Florida 33351 City, State & Zip

(954) 739-7048

Daytime Telephone Number

JUN 06 2001

## ARTICLES OF INCORPORATION

OF

## MD AUTO PERFECTION, INC.

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 MD AUTO PERFECTION, INC. ARTICLE II - PRINCIPAL OFFICE The principal place of business and mailing address of this corporation shall be: 5270 N. State Road 7, Ft. Lauderdale, Florida 33319 ARTICLE III - SHARES The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 100 shares at no par value. ARTICLE IV - INITIAL REGISTERED AGENT AND STREET ADDRESS The name and Florida street address of the initial registered agent are: Michele L. Boxer at 4803 N.W. 97 Avenue, Sunrise, Florida 33351. - INCORPORATOR The name and address of the incorporator of these Articles of Incorporation are: Michele L. Boxer at 4803 N.W. 97 Avenue, Sunrise, Florida 33351 ARTICLE VI - DIRECTORS The corporation shall have one (1) director, and the initial director shall be: Michele L. Boxer at 4803 N.W. 97 Avenue, Sunrise, Florida 33351

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

S/29/01
Date