

P010000085001

TRANSMITTAL LETTER

FILED

01 AUG 27 PM 1:20

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

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

SUBJECT: Precision Auto Collision, Inc.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00 Filing Fee  
☒ \$78.75 Filing Fee  
& Certificate of Status

☐ \$78.75 Filing Fee  
& Certified Copy  
☐ \$87.50 Filing Fee,  
Certified Copy  
& Certificate of  
Status  
**ADDITIONAL COPY REQUIRED**

FROM: John D'Addario  
Name (Printed or typed)

206 Cambridge Blvd

Address

Port Orange, FL 32127

City, State & Zip

(386) 257-5467

Daytime Telephone number

500004559465--7  
-08/28/01--01019--006  
\*\*\*\*78.75 \*\*\*\*78.75

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

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8/28/01

# ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

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## ARTICLE I NAME

The name of the corporation shall be:

Precision Auto Collision, Inc.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

425 Bellevue Ave  
Daytona Beach, Fl 32114-5226

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To engage in the business of auto body repair, retail, and  
wholesale and to perform services in connection therewith.

## ARTICLE IV SHARES

The number of shares of stock is:

One thousand (1,000)

## ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

John D'Addario

206 Cambridge Blvd

Port Orange, Fl 32127-5917

Justin E. D'Addario

206 Cambridge Blvd

Port Orange, Fl 32127-5917

## ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

John D'Addario

206 Cambridge Blvd

Port Orange, Fl 32127-5917

## ARTICLE VII INCORPORATOR

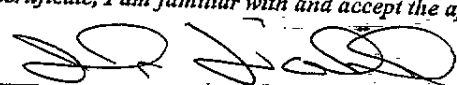
The name and address of the Incorporator is:

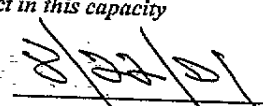
John D'Addario

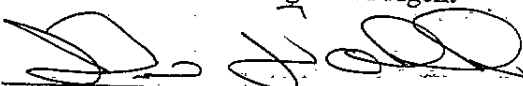
206 Cambridge Blvd

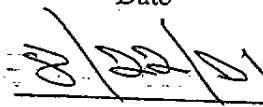
Port Orange, Fl 32127-5917

\*\*\*\*\*  
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this  
certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

  
Signature/Registered Agent

  
Date

  
Signature/Incorporator

  
Date