

Division of Corporations

Page 1 of 2

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## Florida Department of State

Division of Corporations

Public Access System

Katherine Harris, Secretary of State

## Electronic Filing Cover Sheet

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## To:

Division of Corporations

Fax Number : (850) 205-0381

## From:

Account Name : JOHN INCORVIA

Account Number : I19990000040

Phone : (305) 681-7877

Fax Number : (305) 681-9167

## FLORIDA PROFIT CORPORATION OR P.A.

Impact Auto Repair Co.

Certificate of Status	1
Certified Copy	0
Page Count	01
Estimated Charge	\$78.75

B. McKnight OCT 12 2001

FILED  
OCT 12 AM 10:41  
DEPT OF STATE  
TALLAHASSEE, FLORIDA  
10/11/01

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**ARTICLES OF INCORPORATION  
OF  
Impact Auto Repair Co.**

ARTICLE I. NAME

The name of this corporation shall be **Impact Auto Repair Co.**

ARTICLE II. PRINCIPAL OFFICE

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

12233-37 NE 13 Court, North Miami, FL 33161

ARTICLE III. CORPORATE PURPOSE

The corporation was formed to conduct any and all lawful business within the State of Florida.

ARTICLE IV. CAPITAL STOCK

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 V. REGISTERED AGENT

The name and address of the registered agent is:

John Incorvia, Esq., 655 NW 128 Street, Miami, FL 33168

ARTICLE VI. INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation is:

John Incorvia, Esq., 655 NW 128 Street, Miami, FL 33168

The undersigned has executed these Articles of Incorporation this 11<sup>th</sup> day of October, 2001.



John Incorvia, Incorporator

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TALLAHASSEE, FLORIDA

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**CERTIFICATE OF DESIGNATION  
REGISTERED AGENT / REGISTERED OFFICE**

Pursuant to the provisions of Florida Statutes sections 48.091 and 607.501, the undersigned corporation, desiring to organize under the laws of the State of Florida, submits the following statement:

1. The name of the corporation is **Impact Auto Repair, Inc.**
2. The address of the registered office is 655 NW 128 Street, Miami, Florida 33168.
3. The name of the registered agent is John Incorvia, Esq.

Signature: \_\_\_\_\_

John Incorvia, Incorporator

Date: 10/11/2001

Having been named as the registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, and being familiar with the duties and obligations of this position, I hereby accept appointment as registered agent, agree to act in this capacity and comply with the provisions of all statutes relating to the proper and complete performance of my duties.

Signature: \_\_\_\_\_

John Incorvia, Registered Agent

Date: 10/11/2001**FILED**

01 OCT 12 AM 10:41

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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