POROOOO23739

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

| SUBJECT: | 11 G 3 T T T T T T T T T T T T T T T T T T | • |
|----------|--|--------------|
| SUBJECT: | "CAPITAL AUTO TRANSPORT & RECOVERY | SERVICE" |
| | (PROPOSED CORPORATE NAME - MUST IN | CLUDE SUPERV |

Enclosed is 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 ADDITIONAL CO | S87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED | | |
|--------------------|--|--|--|---------|---|
| FROM: | JUAN J. FLORES Name (Pri | inted or typed) | Di I'A | $ar{z}$ | · |
| | 2740 SPRINGFORES | ST ROAD ddress | WAR -4 | ECE | |
| | TALLAHASSEE FLOR | RIDA 32301 | THE CANAL THE CA | 111 | |
| | City, S | tate & Zip | 2000 V CO | . – | - |
| | (850) 709 8048 | <u>.</u> | - 1214 | | |
| | Daytime Tel | ephone number | | • | |

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

O3/4

*****79.00 *****78.75

ICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

CAPITAL AUTO TRANSPORT & RECOVERY SERVICE Twe.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

2740 SPRINGFOREST ROAD TALLAHASSEE FLORIDA 32301

PURPOSE ARTICLE III

The purpose for which the corporation is organized is:

TO ESTABLISH A LEGAL LICENSED ENTITY FOR PURPOSE OF AUTOMOTIVE TRANSPORTATION AND RECOVERY

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

JAUN J. FLORES

PRESIDENT TREASURER

SECRETARY

CRIS Flores

V.P.

REGISTERED AGENT

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

2740 SPRINFOREST ROAD TALLAHASSEE FLORIDA 32301

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

JAUN J. FLORES 2740 SPRINGFOREST ROAD TALLAHASSEE FLORIDA 32301

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 familjar with and accept the appointment as registered agent and agree to act in this capacity

gnature/Régistered Agent

Signature/Incorporator