* PDADOOD 49956

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

500005430976--4 -05/02/02--01054--005 *****78.75 *****78.75

SUBJECT:	ALANS CORF	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)	
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation an	d 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 C & Certifica Status DPY REQUIR	Copy ate of
FROM:	ALAN DE TORK Name		AUTO RE	
-	2255 S7	ARKEY Ro	AD	
-	LARGO City,	FLORIDO. State & Zip	3377/	
-	727- Daytime T	546 -8981 Celephone number		52 HAY SECRETA
			,	-2 MIII: 4 -2 MIII: 4 -SSEE, FLORID

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

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

The name of the corporation shall be:

ALANS CORP.

FILED

02 MAY -2 AM II: 47

TSECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE II	PRINCIPAL OFFICE	

The principal place of business/mailing address is:

2255 STARKEY Road LArgo, FLORIDA 33771

The purpose for which the corporation is organized is:

To include all and LAWful Dusiness for which a corporation may be incorporated under the laws of the state of Ploniba.

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

ALAN DETORE. 7832 CUMBERLAND Rd. LAGO, FI 33777

REGISTERED AGENT

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

ALAN DETORE

7832 CUMBULAND Rd.

LANDO FLORIDA 23777

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

ALAN DETORE 7832 CUMBERLAND Rd. LArgo FL. 33777

****************** 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

Signature/Incorporator