

TRANSMITTAL LETTER

PD2000058607

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

SUBJECT: Carlson's Auto Service Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

400005621174--7
-05/28/02--01047--006
*****87.50 *****87.50

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

FROM: David E. Carlson
Name (Printed or typed)

1428 Morningside Drive
Address

Melbourne, FL 32901
City, State & Zip

(321) 768-6684
Daytime Telephone number

FILED
02 MAY 28 PM 2:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Bm 5/28

ARTICLES OF INCORPORATION

OF

Carlson's Auto Service Inc.

ARTICLE I

The name of this corporation is: **Carlson's Auto Service Inc.**

ARTICLE II

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

1428 Morningside Drive
Melbourne, FL 32901

ARTICLE III

The purpose of this Corporation is to engage in the business of providing vehicle maintenance and repair work and any business permitted under the laws of the State of Florida.

ARTICLE IV

The maximum number of shares which this Corporation is authorized to have outstanding at any time is 1,000 shares of common stock having a par value of \$1.00 per share.

ARTICLE V

The name and address of the initial registered agent is:

<u>NAME</u>	<u>ADDRESS</u>
David E. Carlson	1428 Morningside Drive Melbourne, FL 32901

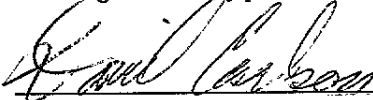
ARTICLE VI

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

<u>NAME</u>	<u>ADDRESS</u>
David E. Carlson	1428 Morningside Drive Melbourne, FL 32901

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TALLAHASSEE, FLORIDA

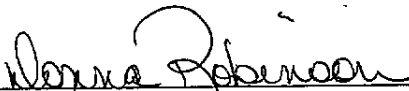
Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating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

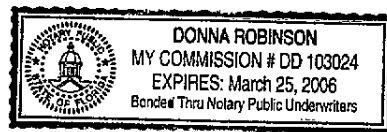

David E. Carlson
Registered Agent / Incorporator

STATE OF FLORIDA
COUNTY OF BREVARD

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State and County aforesaid to take acknowledgements, personally appeared, **David E. Carlson**, who is personally known to me or who produced FL01 C162-165-03-100-0 as identification to me and who executed the foregoing Articles of Incorporation.

WITNESS my hand and official seal in the County and State aforesaid this 3rd day of May, 2002.


Notary Public, State of Florida at Large



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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED