

P030000 41854

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

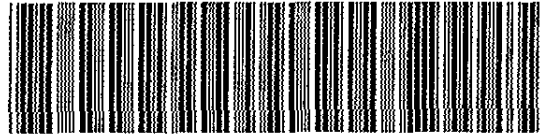
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
03 APR -9 AM 8:03

15-17-000

APR 15

TRANSMITTAL LETTER

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

SUBJECT: Tonka Towing & Recovery, 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: Michael Sanchez
Name (Printed or typed)

PO BOX 651547
Address

Miami FL 33265
City, State & Zip

(305) 980-1943
Daytime Telephone number

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)

ARTICLE I NAME

The name of the corporation shall be:

TUNKA TOWING & RECOVERY, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

place of bus:

4721 NW 7 St #201
Miami, FL 33126

mail add:

PO Box 651547

Miami, FL 33265-1547

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TOWING - automotive

ARTICLE IV SHARES

The number of shares of stock is:

100 @ 1.00 value

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

President: Michael Sanchez 4721 NW 7 St #201
Miami, FL 33126

Vice President: Michael Amantados Sanchez

ARTICLE VI REGISTERED AGENT

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

Michael Sanchez
4721 NW 7 St #201
Miami, FL 33126

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Michael Sanchez & Michelle Amantados Sanchez
4721 NW 7 St #201
Miami, FL 33126

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

MA [Signature]
Signature/Registered Agent

4/6/03
Date

MA [Signature]
Signature/Incorporator

4/6/03
Date

FILED
SECRETARY OF FLORIDA
TALLAHASSEE, FL
03 APR -9 AM 8:03