

PD3000049098

Altamonte Auto Body
1211 E. Hwy 436
Altamonte Springs, FL. 32701

(City/State/Zip/Phone #)

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(Business Entity Name)

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TALLAHASSEE, FLORIDA
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FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

April 18, 2003

ALTAMONTE AUTO BODY
1211 E. HWY 436
ALTAMONTE SPRINGS, FL 32701

SUBJECT: H,M.S. OF ORLANDO
Ref. Number: W03000010126

We have received your document for H,M.S. OF ORLANDO. However, the document has not been filed and is being returned for the following:

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

The registered agent must sign accepting the designation.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6934.

Loria Poole
Corporate Specialist
New Filings Section

Letter Number: 803A00023525

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

03 APR 30 PM 4:23

ARTICLES OF INCORPORATION
OF

H.M.S. OF ORLANDO I.N.C.,

ARTICLE I NAME

THE NAME OF THE CORPORATION SHALL BE:

H.M.S. OF ORLANDO I.N.C.,

THE PRINCIPAL PLACE OF BUSINESS OF THIS CORPORATION SHALL BE
1211 E.ALTAMONTE DR.ALTAMONTE SPGS,FL. 32701

ARTICLE 11 NATURE OF BUSINESS

THE CORPORATION MAY ENGAGE IN OR TRANSACT ANY AND ALL LAWFUL
ACTIVITIES OR BUSINESS PERMITTED UNDER THE LAWS OF THE UNITED
STATES, THE STATE OF FLORIDA, OR ANY OTHER
STATE, COUNTRY, TERRITORY OR NATION.

ARTICLE 111 CAPITAL STOCK

THE AGGREGATE NUMBER OF SHARES OF STOCK AND ITS PAR VALUE
THAT THIS CORPORATION IS AUTHORIZED TO HAVE OUTSTANDING AT
ANY ONE TIME IS:

500 SHARES AT \$ 1.00 EACH.

ARTICLE 1V TERM OF EXISTENCE

THE CORPORATION IS TO EXIST PERPETUALLY.

ARTICLE V OFFICERS DIRECTORS

THE NAME (S) AND STREET ADDRESS(ES) OF THE INITIAL OFFICER(S) AND
DIRECTOR(S), IF ANY, WHO SHALL HOLD OFFICE THE FIRST YEAR OF THE
CORPORATION'S EXISTENCE OR UNTIL THEIR SUCCESSOR(S) IS(ARE)
ELECTED, IS(ARE):

ROBERT FAGO
1211 E.ALTAMONTE DR
ALTAMONTE SPGS,FL.32701

03 MAY -2 AM 10:14
SECRETARY OF STATE
TALLAHASSEE FLORIDA

FILED

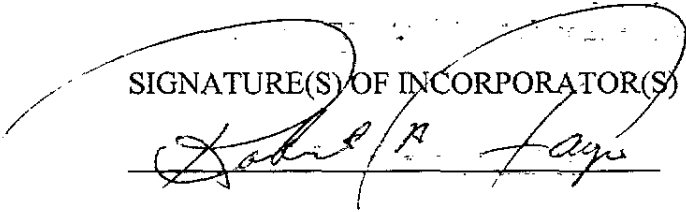
ARTICLE VI INCORPORATOR(S)

THE NAME (S) AND STREET ADDRESS(ES) OF THE INCORPORATOR(S) TO
THIS ARTICLES OF INCORPORATION IS(ARE):

ROBERT FAGO
1211 E. ALTAMONTE DR.
ALTAMONTE SPGS, FL. 32701

IN WITNESS WHEREOF, THE UNDERSIGNED INCORPORATOR(S) HAS
(HAVE) EXECUTED THESE ARTICLES OF INCORPORATION THIS
27 DAY OF MARCH, 2003.

SIGNATURE(S) OF INCORPORATOR(S)



STATE OF FLORIDA,

COUNTY OF SEMINOLE.

THE FOREGOING INSTRUMENT WAS ACKNOWLEDGED AND SWORN TO
BEFORE ME THIS 27 DAY OF MARCH 2003, BY
OF ROBERT FAGO NAME OF INCORPORATOR

H.P.S. OF ORLANDO, Inc.
NAME OF CORPORATION.

NOTARY PUBLIC

MY COMMISSION EXPIRES _____



(SEAL)

CERTIFICATE DESIGNATING
REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.325, FLORIDA STATUTES,
THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE
STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN
DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE
OF FLORIDA.

1. THE NAME OF THE CORPORATION IS:

H.M.S. OF ORLANDO INC.

2. THE NAME AND ADDRESS OF THE REGISTERED AGENT AND OFFICE IS:

ROBERT FAGO
1211 E ALTAMONTE DR.
ALTAMONTE SPGS. FL. 32701

SIGNATURE

Robert M. Fago
CORPORATE OFFICER

TITLE

Incorporator / Registered Agent

DATE

3/26/03

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TALLAHASSEE FLORIDA
SECRETARY OF STATE

HAVING BEEN NAMED TO ACCEPTS SERVICE OF PROCESS FOR THE ABOVE
STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE,
I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO
COMPLY WITH THE PROVISIONS OF AL ; STATUTES RELATIVE TO THE
PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT
THE DUTIES AND OBLIGATIONS OF SECTION 607.325 FLORIDA STATUTES.