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| (Business Entity Name) | | | | | | |
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| Certified Copies Certificates of Status | | | | | | |
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| Special Instructions to Filing Officer: | | | | | | |
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Office Use Only



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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ML 5/23

TRANSMITTAL LETTER

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

SUBJECT: Quality Repair Center
(Proposed corporate name)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for \$ 78.50

FROM:

RAFAel J. Cruz

Name (printed or typed)

773 W. LANDCASTER RIN Unit Q, R
Address

ORIANDO, FI 3.28.09

City, State, & Zip

321-303-7887

Telephone Number

03 MAY 23 PH 4: 37

ARTICLES OF INCORPORATION TALLAHASSEE, FLORIDA

OF

Quality Repair Center INC.

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be: Quality Repair Center INC

ARTICLE II PRINCIPAL OFFICE

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

773 W. LANDCASTER RD. UNIT Q.R ORIANDO, FI. 32809 ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: $\frac{100}{100}$

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is: RAFAel 3 CRU

850 Commonwealth Court Casselberry, Fl. 32707

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

RAFACI S. CRUZ.
773 W. LANDCASTER RD.
UNH Q, R.
ORLANDO, FI. 32809

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

3 day of APRIL 2003.

RAFAEL S. CRUZ Signature

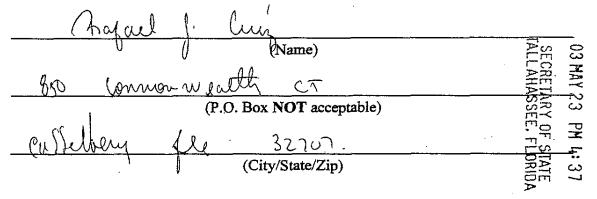
Signature

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.0501 or 617.0501, 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: | | | | | |
|----|---------------------------------|-------|--------|----|--|--|
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| | Quality | lepan | Certer | mo | | |
| | 1 | | - " | | | |

2. The name and address of the registered agent and office is:



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.

Signature Date