

PO3000093992

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

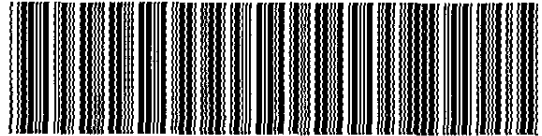
(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
DIVISION OF CORPORATION

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me 8/27

Charter Number Only

8/26

Cost Management

Requestor's Name

4805 NW 79 Ave. #9.

Address

miami FL 33166

City

State

ZIP

Phone

593-5151 F

CORPORATION(S) NAME

Tropical Trailers Parts & Accessories Inc.

☒ Profit

☐ NonProfit

☐ Amendment

☐ Merger

☐ Foreign

☐ Dissolution

☐ Mark

☐ Limited Partnership

☐ Annual Report

☐ Other

☐ Reinstatement

☐ Reservation

☐ Change of Registered Agent

☒ Certified Copy

☐ Photo Copies

☐ Certificate Under Seal

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☐ Call If Problem

☐ After 4:30

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Availability
Document
Examiner
Updater
Verifier
Acknowledgment
W.P. Verifier

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VALIDATION ONLY

ARTICLES OF INCORPORATION

WE THE UNDERSIGNED, HEREBY ASSOCIATE OURSELVES TOGETHER FOR THE PURPOSE OF BECOMING A CORPORATION UNDER THE LAWS OF THE STATE OF FLORIDA PROVIDING FOR THE FORMATION OF A CORPORATION FOR PROFIT WITH THE POWERS, RIGHTS, PRIVILEGES AND IMMUNITIES HEREINAFTER MENTIONED, AND WE HEREBY MAKE, SUBSCRIBE AND ACKNOWLEDGE AND FILE WITH THE SECRETARY OF FLORIDA THESE ARTICLES OF INCORPORATION; AND TO THAT END WE DO, BY THESE ARTICLES, SET FORTH:

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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ARTICLE I

THE NAME OF THIS CORPORATION (WHICH IS HEREINAFTER CALLED THE "CORPORATION" IS TROPICAL TRAILERS PARTS & ACCESSORIES, INC.

ARTICLE II

THIS CORPORATION SHALL EXIST PERPETUALLY, CORPORATION EXISTANCE SHALL BEGAIN ON THE DAY UPON WHICH THESE ARTICLES ARE APPROVED BY THE SECRETARY OF THE STATE OF FLORIDA.

ARTICLE III

THE PURPOSE OF THIS CORPORATION IS TO TRANSACT ANY OR ALL LAWFUL BUSINESSES FOR WHICH CORPORATIONS MAY BE INCORPORATED UNDER CHAPTER 607 OF THE FLORIDA STATUTES.

ARTICLE IV

THIS CORPORATION IS AUTHORIZED TO ISSUE 500 SHARES OF COMMON STOCK, WHICH SAID SHARES SHALL HAVE A PAR VALUE OF TEN (\$10.00) DOLLARS PER SHARE UPON ISSUANCE.

ARTICLE V

THE PRINCIPAL PLACE OF BUSINESS OF THIS CORPORATION SHALL BE AT 10611 SW 139 AVENUE MIAMI, FLORIDA 33186 WITH THE PRIVILEGE OF HAVING BRANCH OFFICES WITHIN AND WITHOUT THE STATE OF FLORIDA.

ARTICLE VI

THE INITIAL REGISTERED AGENT OF THIS CORPORATION UPON WHICH PROCESS MAY BE SERVED IS,
LOUIS F. CAST 4805 NW 79 AVENUE #9 MIAMI,FLORIDA 33166

ARTICLE VII

THIS CORPORATION SHALL HAVE ONE DIRECTOR(S) INITIALLY.
THE NUMBER OF DIRECTORS SHALL BE FIXED BY LAW AND MAY BE CHANGED FROM TIME TO TIME.

ARTICLE VIII

THE NAME AND STREET ADDRESSES OF THE INITIAL DIRECTOR OF THIS CORPORATION IS:
JOSE L. SALERMO 10611 SW 139 AVENUE MIAMI, FLORIDA 33186 THE AFORESAID
DIRECTORS SHALL HOLD OFFICE FOR THE YEAR OF THIS CORPORATION EXISTANCE OR
UNTIL A SUCCESSOR IS CHOSEN AS PROVIDED FOR IN THE BYLAWS.

THE INITIAL OFFICERS OF THIS CORPORATION AND THEIR ADDRESSES ARE:

PRESIDENT:JOSE L. SALERMO 10611 SW 139 AVENUE MIAMI, FLORIDA 33186

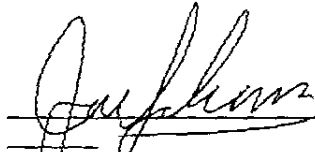
VICE PRESIDENT : JOSE SALERMO 10611 SW 139 AVENUE MIAMI, FLORIDA 33186

TREASURER : MARIA SALERMO 10611 SW 139 AVENUE MIAMI,FLORIDA 33186

SECRETARY: JOSE L SALERMO 10611 SW 139 AVENUE MIAMI,FLORIDA 33186

ARTICLE IX

THE NAME AND STREET ADDRESS OF THE INCORPORATOR
JOSE L. SALERMO 10611 SW 139 AVENUE MIAMI,FLORIDA 33186
THE UNDERSIGNED HAS EXECUTED THESE ARTICLES OF INCORPORATION



SIGNATURE / TITLE /
JOSE L. SALERMO / PRESIDENT

CERTIFICATE OF DESIGNATION

REGISTERED AGENT / REGISTERED OFFICE


PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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 : TROPICAL TRAILERS PARTS & ACCESSORIES, INC.
- 2 THE NAME AND ADDRESS OF THE REGISTERED AGENT IS :
LOUIS F. CAST, 4805 NW 79 AVENUE # 9 MIAMI, FLORIDA 33166

SIGNATURE: 
JOSE L. SALERMO / PRESIDENT

DATE : AUGUST 25, 2003

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.


LOUIS F. CAST

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TALLAHASSEE, FLORIDA

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