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TRANSMITTAL LETTER

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Department of State Division of Corpor P. O. Box 6327 Tallahassee, FL 32	ations	Control of the Contro	askiri i territori della di serie di s
SUBJECT: RC	AUTOMOTIVE REPAIR INC	C ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an ori	ginal and one (1) copy of the ar	ticles of incorporation and	a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	☑ \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED
FROM: _F	ROBERTO GONZALEZ	e (Printed or typed)	
	PO BOX 830023	Address	
	OCALA,, FL 34483	, State & Zip	<u> </u>
 	352 - 308 - 1919 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:

RC AUTOMOTIVE REPAIR INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 10036 SE 58TH AVE BELLEVIEW FL, 34420

ARTICLE III **PURPOSE**

The purpose for which the corporation is organized is: PROFESIONAL CORPORATION

ARTICLE IV SHARES

The number of shares of stock is: ONE HUNDRED SHARES

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

ROBERTO GONZALEZ PRESIDENT RAFAEL A. GONZALEZ VICE PRESIDENT CAROL A. GONZALEZ SECRETARY

ARTICLE VI REGISTERED AGENT

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

ROBERTO GONZALEZ 7514 HEMLOCK RD OCALA, FL 34472

INCORPORATOR

The name and address of the Incorporator is:

ROBERTO GONZALEZ PO BÓX 830023 OCALA, FL 34483

ARTICLE VII

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

Signature/Registered Agent

1/-17-03 Date

Date

Signature/Incorporator