# P03000144020

(Requestor's Name)  (Address)  (Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status  Special Instructions to Filing Officer:								
(Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status	(Requestor's Name)							
(Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status	(Address)							
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Office Use Only

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OFFICE USE ONLY(DOCUMENT #)	
LAZARUS CORPORATE FILIN	G SERVICE
3320 S.W. 87 AVENUE	
MIAMI, FLORIDA (305)552-5973	
	· · · · · · · · · · · · · · · · · · ·
	OFFICE USE ONLY
CORPORATION NAME(s) & DO	CUMENT NUMBER(S) (if known):
	· · · · · · · · · · · · · · · · · · ·
1. 5000 (Corporation Name)	AUTOSERVICES INC.
2.	
(Corporation Name)	(Document #)
3. (Corporation Name)	(Document #)
4. (Corporation Name)	(Document #)
Walk in Pick up time	Certified Copy
Mail out Will wait	Photocopy Certificate of Status
NI W FILINGS	AMENDMENTS
Profit	Amendment
NonProfit	Resignation of R.A., Officer/Director .
. Limited Liability	Change of Registered Agent
Domestication	Dissolution/Withdrawal
Other	Merger
OTHER FILINGS	REGISTRATION/ QUALIFICATION
Annual Report	Foreign
Fictitious Name	Limited Partnership
Name Reservation	Reinstatement
	Trademark

Other

Examiner's Initials

FILED

03 DEC -3 PM 12: 55

--- SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION OF SOLORIANO AUTO SERVICES INC.

#### ARTICLE I

THE NAME OF THE CORPORATION IS:

SOLORZANO AUTO SERVICES INC.

### ARTICLE II

THE CORPORATION MAY ENGAGE IN ANY ACTIVITY OR BUSINESS PERMITTED UNDER THE LAWS OF THE UNITED STATES AND UNDER THE LAWS OF THE STATE OF FLORIDA.

#### ARTICLE III

THE MAXIMUM NUMBER OF SHARES OF CAPITAL STOCK THAT THE CORPORATION IS AUTHORIZES TO ISSUES IS 500 SHARES AT \$1.00 PER VALUE.

#### ARTICLE IV

THE AMOUNT OF CAPITAL WITH WHICH THE CORPORATION WILL BEGIN BUSINESS IS THE SUM OF \$500.00

## ARTICLE V

THE CORPORATION SHALL HAVE PERPETUAL EXISTENCE UNLESS SOONER DISSOLVED ACCORDING TO LAW, AND ITS EXISTENCE SHALL COMMENCE UPON FILING.

#### ARTICLE VI

THE STREET ADDRESS IS THE PRINCIPAL OFFICE OF THE --CORPORATION IN THIS STATE SHALL BE:

5615 SW 8 STREET MIAMI FLORIDA, 33134

## ARTICLE VII

THE NAME(S) AND STREET ADDRESS(ES) OF THE PERSON SIGNING THESE ARTICLES ARE:

JULIO SOLORZANO

1225 SW 6 STREET APT. #3 MIAMI FLORIDA, 33135

### ARTICLE VIII

THE CORPORATION SHALL HAVE A BOARD OF DIRECTORS CONSISTING OF NOT LESS THAN TWO OR MORE THAN SIX DIRECTORS. THE INITIAL BOARD OF DIRECTORS SHALL CONSIST OF ONE DIRECTORS WHOSE NAME AND ADDRESS ARE AS FOLLOWS:

### JULIO SOLORZANO

FILED

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

#### ARTICLE IX

THE STREET ADDRESS OF THE INITIAL REGISTERED OFFICE, AND THE NAME OF THE INITIAL REGISTERED AGENT AT THAT ADDRESS SHALL BE:

JULIO SOLORZANO 1225 SW 6 STREET #3 MIAMI FLORIDA, 33135

THE UNDERSIGNED HAS (HAVE) EXECUTED THESE ARTICLES OF INCORPORATION THIS TWENTY SEVEN DAY OF NOVEMBER OF 2003

JULIO SOLORZANO

SIGNATURE

# FILED

# CERTIFICATE OF DESIGNATION

03 DEC -3 PM 12: 55

# REGISTERED AGENT/REGISTERED OFFICE

SECRETARY OF STATE TALLAHASSEE, FLORIDA

Pursuant to the provisions of sections 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 na	ame of	the c	orpora	tion is	s: SOLORZ	'UA ONA	TO SI	ERVICES	
IN	c		<u></u> -	<del></del>						
2.	The n	ame an	d addr		the ro		_		office	is
				1225 9	NAME S 6 WE	REET #3				
			(F			ACCEPTABL A, 33135				
	.—		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(CI	TY/STAT	E/ZIP)				

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: NOVEMBER 27, 2003