

P04000014489

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

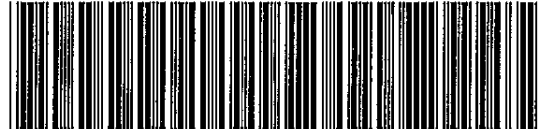
(Document Number)

Certified Copies _____

Certificates of Status _____

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Office Use Only



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FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
04 JAN 20 AM 7:36

RECEIVED
04 JAN 20 AM 11:51
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

OFFICE USE ONLY(DOCUMENT #)

LAZARUS CORPORATE FILING SERVICE

3320 S.W. 87 AVENUE

MIAMI, FLORIDA (305)552-5973

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. XTREME TOWING SERVICE, CORP
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

☒ Walk in ☒ Pick up time 2.00 ☒ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
<input checked="" type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials

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:

XTREME TOWING SERVICE, CORP

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

**14864 SW 35TH LN.
MIAMI, FLA. 33185**

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

GENERAL PROFIT CORP

ARTICLE IV SHARES

The number of shares of stock is:

ONE HUNDRED

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

**AMAURY E HIDALGO
14864 SW 35TH LN.
MIAMI, FLA. 33185**

ARTICLE VI REGISTERED AGENT

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

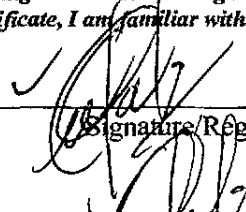
**AMAURY E HIDALGO
14864 SW 35TH LN.
MIAMI, FLA. 33185**

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

**AMAURY E HIDALGO
14864 SW 35TH LN.
MIAMI, FLA. 33185**

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

1-16-04

Date



Signature/Incorporator

1-16-04

Date

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