

Division of Corporations

P.05

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SECRETARY OF STATE
TALLAHASSEE, FLORIDAFlorida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 205-0381

From:

Account Name : TEMPLE TERRACE ACCOUNTING & TAX, INC.
Account Number : I19990000044
Phone : (813) 988-5521
Fax Number : (813) 989-8824

FLORIDA PROFIT CORPORATION OR P.A.

ALLISON AUTOMOTIVE MANAGEMENT SERVICES, INC.

Certificate of Status	0
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ARTICLES OF INCORPORATION
OF

Allison Automotive Management Services, Inc.

The undersigned incorporator, for the purposes of forming a corporation under the Florida General Corporation Act, hereby adopts the following Articles of Incorporation.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be : **Allison Automotive Management Services, Inc.**

The principal place of business of this corporation shall be :

12920 Astorwood Drive
Riverview, FL 33569

ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business Permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its par value that this corporation is Authorized to have outstanding at any one times is: 1,000 having a par value of \$ 1.00.

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE V OFFICERS DIRECTORS

The names and street address of the initial officers and directors, if any, who shall Hold office the first year of the corporation's existence or until their successors are elected, are:

Kevin Allison, President

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ARTICLE VI INCORPORATOR

The name and street address of the incorporator to this articles of incorporation
are:

<u>NAME</u>	<u>OFFICE</u>	<u>ADDRESS</u>
Kevin Allison	President	12920 Astorwood Drive Riverview, FL 33569

IN WITNESS WHEREOF, the undersigned incorporator has executed these
Articles of Incorporation this 27th day of April, 2004.

Signature of Incorporator



Kevin Allison

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REGISTERED AGENT/REGISTERED OFFICE
CERTIFICATE OF DESIGNATION

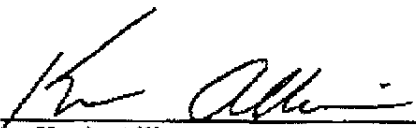
Pursuant to the provisions of Section 607.325, Florida Statutes, the undersigned Corporation, organized under the laws of the State of Florida, submits the Following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the corporation: Allison Automotive Management Services, Inc.

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

Kevin Allison – President – 12920 Astorwood Drive Riverview, FL 33569

SIGNATURE:


Kevin Allison

TITLE: President

DATE: April 27, 2004

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325, FLORIDA STATUTES.

SIGNATURE:


Kevin Allison

DATE: April 27, 2004

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