

**P04000141487**

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

From: Account Name : FAS-T CORP. AGENTS, INC.  
Account Number : 071001002335  
Phone : (305) 599-0839  
Fax Number : (305) 716-0346

FILED  
2009 OCT 13 P 12:35  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**FLORIDA PROFIT CORPORATION OR P.A.**

*Southeast Automotive Inc*  
~~South Coast Enterprise Inc.~~

Certificate of Status	0
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*[Signature]* 10/13/✓



## FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

October 12, 2004

FAS-T CORP. AGENTS, INC.

SUBJECT: SOUTH COAST ENTERPRISE INC.  
REF: W04000037535

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document number of the name conflict is L04000040274.

An effective date may be added to the Articles of Incorporation if a 2005 date is needed, otherwise the date of receipt will be the file date. A separate article must be added to the Articles of Incorporation for the effective date.

If you have any further questions concerning your document, please call (850) 245-6973.

Claretha Golden  
Document Specialist  
New Filings SectionFAX And. #: H04000202991  
Letter Number: 104A00058857

ARTICLES OF INCORPORATION  
OF

SOUTHCOAST AUTOMOTIVE INC.

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida General Corporation Act, hereby adopt(s) the following Articles of incorporation.

ARTICLE I NAME

The name of the corporation shall be: SOUTHCOAST AUTOMOTIVE INC.

5443 SW 127 Ct

Miami, FL 33175

The principal place of business of this corporation shall be:

5443 SW 127 Ct

Miami, FL 33175

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 value that this corporation is authorized to have outstanding at any one time is:

100 Shares at 1.00 Par  
Value

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is(are) elected, is(are):

Jose R. Echevarria (President)

5443 S.W. 127 Ct

Miami, FL 33175

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2004 OCT 13 PM 12:35

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ARTICLE VI INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to this articles of incorporation is(are):

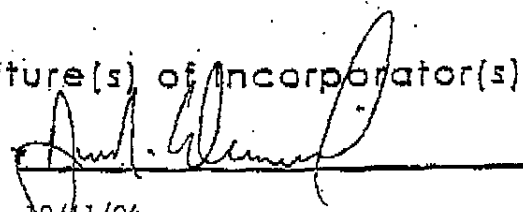
Jose R. Echevarria

5443 S.W. 127 Ct

Miami, F 33175

IN WITNESS WHEREOF, the undersigned incorporator(s) has (have) executed these Articles of Incorporation this, 11th day of October 2004

Signature(s) of incorporator(s)



10/11/04

CERTIFICATE OF DESIGNATION  
REGISTERED AGENT/REGISTERED OFFICE

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:

SOUTHCOAST AUTOMOTIVE INC.

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

Jose R. Eschevarria 5443 SW 127 Ct

(P.O. BOX NOT ACCEPTABLE)

Miami, FL 33175

(CITY/STATE/ZIP)

SIGNATURE

TITLE

DATE

*[Signature]*

PRESIDENT

10/11/04

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 CAPACITY, AND I FURTHER AGREE TO COMPLY WITH THE 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

DATE

*[Signature]*  
10/11/04