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TRANSMITTAL LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

Enclosed are an original and one (1) copy of the articles of incorporation and a check for: \$87.50 \$70.00 \$78.75 \$78.75 Filing Fee Filing Fee Filing Fee Filing Fee, & Certified Copy & Certificate of Status Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED Name (Printed or types),

4053 Rainbow Cr.

Address

Labelle, Fl. 33935

City, State & Zip

NOTE: Please provide the original and one copy of the articles.

863-612-1171 Daytime Telephone number ARTICLES OF INCORPORATION

NAME

ARTICLE II PRINCIPAL OFFICE

PURPOSE

The name of the corporation shall be:

ARTICLE I

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

Hendry Towing & Recovery Corp.

The principal place of business/mailing address is:
4053 Rainbow Cr. Labelle, Fl. 33935