

PD5000053279

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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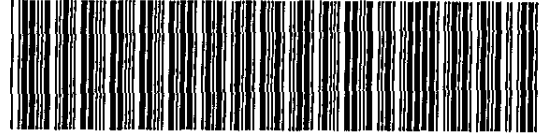
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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05 APR -5 AM 8:11  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

4/12/05  
BMC

## TRANSMITTAL LETTER

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

SUBJECT: MIKE'S AUTO BODY, INC.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00 Filing Fee  
☒ \$78.75 Filing Fee  
& Certificate of Status

☐ \$78.75 Filing Fee  
& Certified Copy  
☐ \$87.50 Filing Fee,  
Certified Copy  
& Certificate of  
Status  
**ADDITIONAL COPY REQUIRED**

FROM: \_\_\_\_\_  
Name (Printed or typed)

c/o Edna Horowitz 208 Tide Avenue  
\_\_\_\_\_  
Address

Tavernier, FL 33070  
\_\_\_\_\_  
City, State & Zip

305-852-1456  
\_\_\_\_\_  
Daytime Telephone number

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

3/31/05

**ARTICLES OF INCORPORATION**

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

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DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I NAME**

The name of the corporation shall be:

MIKE'S AUTO BODY, INC.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

9195 Overseas Highway  
TAVERNIER FL 33070

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

THE GENERAL NATURE OF BUSINESS OF THIS CORPORATION  
IS TO TRANSACT ANY AND ALL LAWFUL BUSINESS.

**ARTICLE IV SHARES**

The number of shares of stock is:

500 SHARES having an individual par value of \$1.00.

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

MICHAEL A. NOONON, PRESIDENT, DIR.  
361 MAHOGANY DR.  
KEY LARGO, FL. 33037

Ann L. Noonan, V.P.  
361 Mahogany Dr.  
Key Largo, FL 33037

**ARTICLE VI REGISTERED AGENT**

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

EDNA M. HOROWITZ  
208 TIDE AVENUE  
TAVERNIER, FL 33070

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

EDNA M. HOROWITZ  
208 TIDE AVENUE  
TAVERNIER, FL 33070

\*\*\*\*\*

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

Signature/Incorporator

Date

Date