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(Requestor's Name)				
(Address)				
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,				
(City/State/Zip/Phone #)				
(Crystalla Lips state in)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				



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TRANSMITTAL LETTER

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

SUBJECT: SVVIF'S	MOBILE TIRE GROOVING, IN	<i>ب</i> .	
	(PROPOSED CORPOR	YTE NAME – MUST INCL	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the art	ticles of incorporation and	l a check for:
□ \$70.00 Filing Fee	☑ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate o Status PY REQUIRED
FROM;		ara D. Blackmon e (Printed or typed)	
	868 N.W. 17th Ave Address		
	Fort Lauderdale, Florida 33311 City, State & Zip		
	954-728-9926 Daytime Telephone number		
	24, mine	hivoria trestrans	

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

ARTICLES OF INCORPORATION

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

FILED

ARTICLE I NAME

The name of the corporation shall be:

SWIF'S MOBILE TIRE GROOVING, INC.

- 05 APR -6 PM 1:16 SECHETARY OF STATE

TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 868 N.W. 17th Avenue Fort Lauderdale, Florida 33311

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

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 IV SHARES

The number of shares of stock is: 1,000 shares with a \$1.00 par value

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Fenton Blackmon, Director 868 N.W. 17th Avenue Fort Lauderdale, Florida 33311 Tiara D. Biackmon, Director 868 N.W. 17th Avenue Fort Lauderdale, Florida 33311

ARTICLE VI REGISTERED AGENT

The <u>name and Florida street address</u> (P.O. Box NOT acceptable) of the registered agent is:

Tiara D. Blackmon, Director 868 N.W. 17th Avenue Fort Lauderdale, Florida 33311

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Tiara D. Blackmon, Director 868 N.W. 17th Avenue Fort Lauderdale, Florida 33311

***********************	************
Having been named as registered agent to accept service of process for the abo	ve 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
Airla 1 Oi	
11Wa & Blackman	April 3, 2005
Signature/Registered Agent	Date

Signature/Registered Agent

April 3, 2005

Signature/incorporator

Date