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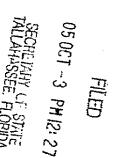
(Requestor's Name)				
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PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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Certified Copies Certificates of Status				
Serance Sopies Serance of Seattle				
Special Instructions to Filing Officer:				
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COVER LETTER

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

SUBJECT: CATHY SCATA CO				
(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)				
Enclosed are an orig	inal and one (1) copy of the arti	cles of incorporation and	l a check for:	
	\$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of	
		ADDITIONAL CO	Status DPY REQUIRED	
FROM: CATHY SCATA Name (Printed or typed)				
613 BARBARO CN				
Address JACKSIN VILLE FL City, State & Zip 904-242-0082 Daytime Telephone number				

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

ARTICLES OF INCORPORATION	ĦLED
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	
ARTICLE I NAME	05 OCT -3 PM 12: 27
The name of the corporation shall be:	SECRETARY OF STATE
CATHY SCATA CO	TALLAHASSEE, FLORIDA
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is:	
The principal place of business/maining address is.	•
C/O 6013 BARBARA CN	
TACKEUNVILLE FG. 32250	
ARTICLE III PURPOSE The purpose for which the corporation is organized is:	
AUTOMOTIUE SALKS	
ARTICLE IV SHARES	
The number of shares of stock is:	
1200	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS	_
List name(s), address(es) and specific fitle(s):	,
CATHY SCATA - PRESIDENT + BOARD	
GIB BANBARA LN TACKSONVILLE FR. 32250	
ALCHARACI CARRA - TON OCIVAR	
4102 NOBW HOOD NO JACKSONVICER !	4.52200
ARTICLE VI REGISTERED AGENT	
The name and Florida street address (P.O. Box NOT acceptable) of the re	gistered agent is:
Michano Cu. CAPEN	
4102 losson Hove 10	
TRUKSONVICLE &. 32210	
ARTICLE VII INCORPORATOR The name and address of the Incorporator is:	• • •
	••
CATHY SCATA 613 BANSANS SEN	
TACKSINUILLE Pr. 32250	

Having been named as registered agent to accept service of process for the above stated certificate, I am familiar with and accept the appointment as registered agent and agree to	corporation at the place designated in this act in this capacity
Sintell William RICHARD CAPON	9-26-01
Signature/Registered Agent	Date

Signature/Incorporator

CATHY SCATA

9-26-07 Date