P060000040965

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
, , , , ,				
PICK-UP WAIT MAIL				
(Duoinage Estity Norma)				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
Coposition and a control of the cont				

Office Use Only



100068103851

03/20/06--01053--006 **78.75

1006 HAR 20 A 7 52 SECRETARY OF STATE

COVER LETTER

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

SUBJECT:	ALL STANDARD TRAI (PROPOSED CORPORA	<u>NSMISSIONS INC</u> TE NAME – <u>MUST INCLI</u>	J <u>DE SUFFIX</u>)	
Enclosed are an orig	inal and one (1) copy of the artix \$78.75 Filing Fee & Certificate of Status	cles of incorporation and \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status	
FROM:	DANIEL L RODRIGUEZ Name (Printed or typed)			
2049 W. 62nd STREET Address HIALEAH, FLORIDA 33016 City, State & Zip 305-778-1825 Daytime Telephone number				

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)

ARTICLE I NAME

The name of the corporation shall be:

ALL STANDARD TRANSMISS

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

2049 W. 62nd STREET HIALEAH, FL. 33016

ARTICLE III **PURPOSE**

The purpose for which the corporation is organized is:

TRANSMISSION SHOP & PARTS

ARTICLE IV SHARES

The number of shares of stock is:

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

DANIEL L. RODRIGUEZ , PRESIDENT - PD LOUISE VELO, VSTD

ARTICLE VI REGISTERED AGENT

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

LOUISE VELO 5512 LAGOON DRIVE FORT LAUDERDALE, FL. 33312

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

DANIEL L. RODRIGUEZ 2049 W. 62nd STREET HIALEAH, FL. 33016

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 familial with and accept the appointment as registered agent and agree to act in this capacity

Signature/Re

Signature 4 orporator 3-1-006 Date 3-13-2006