706888061144

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

Office Use Only



800072657238

04/28/06--01057--002 **78.75

TILEU

1006 APR 28 P 12: 14

SECRETARY OF STATE
SECRETARY SEE, FLORIDI

51,00

COVER LETTER

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

SUBJECT: Automotive Performance Specialties Inc (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an orig	inal and one (1) copy of the ar	ticles of incorporation and	d 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 of Status
FROM: R	ichard Hurvitz		
		e (Printed or typed)	
	1046 Douglas ave		
		Address	
	Altamonte Springs Flo	orida 32714	
	Cit	y, State & Zip	
	407-682-1865		
	Davtime	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:

Automotive Performance Specialties Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

1046 Douglas AVE Altamonte Springs FL 32714

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

automotive performance

ARTICLE IV SHARES

The number of shares of stock is:

100

, ...

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

President / Treasurer Richard Hurvitz 1046 Douglas AVE Altamonte Springs FL 32714 Vice President / Sec. John Stagnita 340 lake point place Merritt Island FL 32953

ARTICLE VI REGISTERED AGENT

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

Richard Hurvitz 1046 Douglas AVE Altamonte Springs FL 32714

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

John Stagnita 340 lake point place Merritt Island FL 32953

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 Ngent

Signature/Incorporator

Date