## P06000074243

	. i
(Requestor's Name)	<b>'</b>
(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:	
Cecilia Ferrizave AUTHORIZATION BY PHONE TO CORRECT / Thelis IV + type incorpor DATE 5/30/06	cta
DOC. EXAM	
	`)
Office Use Only	W



800075188658

05/26/06--01029--004 \*\*78.75

06 MAY 26 PM 1: 38
SECRETARY OF STATE

MB 30

100 24781.

## **COVER LETTER**

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

SUBJECT:	Thunder towing INC (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)		
	(PROPOSED CORPORA)	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the artic	cles 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	& Certificate of Status
FROM:	GEOUANE Name (	Demours (Printed or typed)	
	4351 NW	44 AVEN	UE
	Pampane B	each, FL 33	064
	(954) 7 Daytime To	-93 - 5523 elephone 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	06 MAY 26 PM 4: 38
The name of the corporation shall be:	SECRETARY OF STATE
THUNDER TOWING INC.	SECRETARY OF STATE TALLAHASSEE, FLORIDA
ARTICLE II PRINCIPAL OFFICE  The principal place of business/mailing address is:  4351 NW 44 AUENUE  POMPANO BEACH, FL 33064  ARTICLE III PURPOSE  The purpose for which the corporation is organized is:  1001NG SERVICES	
ARTICLE IV SHARES The number of shares of stock is: // 000	···
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s):	
Geovane Demoura - president	
Cecilia Ferraz- Vice-president	
ARTICLE VI REGISTERED AGENT  The name and Florida street address (P.O. Box NOT acceptable) of the Gasuane Demoura  4351 NW 4th Avenue  Pempare Block, FL 33064	ne registered agent is:
ARTICLE VII INCORPORATOR	
The <u>name and address</u> of the Incorporator is:	
Geovane Demoura 4351 NW 44 Avenue	
Pompano Bood, FL 33064	
	**********
Having been named as registered agent to accept service of process for the above st certificate, I am familiar with and accept the appointment as registered agent and agr	
Seavane de Moura	05/23/2006
Signature/Registered Agent/Incorporator	Date

Date

Signature/Incorporator