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(Requestor's Name)

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(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

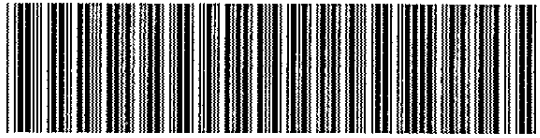
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
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*gt 11/1/07*

**COVER LETTER**

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS

07 OCT 31 PM 2:19

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

SUBJECT: Redline Tractor Repair Services, Inc.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

\$70.00  
Filing Fee

\$78.75  
Filing Fee  
& Certificate of Status

\$78.75  
Filing Fee  
& Certified Copy

\$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

**ADDITIONAL COPY REQUIRED**

FROM: Ivette Cifuentes

Name (Printed or typed)

15433 S.W. 172nd Street

Address

Miami, FL 33187

City, State & Zip

305-255-1672

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)

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DIVISION OF CORPORATIONS

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**ARTICLE I NAME**

The name of the corporation shall be:

Redline Tractor Repair Services, Inc.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailing address is:

15433 S.W. 172nd Street  
Miami, FL 33187

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Tractor Repair Services

**ARTICLE IV SHARES**

The number of shares of stock is:

One

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

Ivette Cifuentes  
15433 S.W. 172nd Street  
Miami, FL 33187  
President

Eladio Cifuentes  
15433 S.W. 172nd Street  
Miami, FL 33187  
Secretary

**ARTICLE VI REGISTERED AGENT**

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

Ivette Cifuentes  
15433 S.W. 172nd Street  
Miami, FL 33187

**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

Ivette Cifuentes  
15433 S.W. 172nd Street  
Miami, FL 33187

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*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*

		10/29/07
Signature/Registered Agent	Ivette Cifuentes	Date
		10/29/07
Signature/Incorporator	Ivette Cifuentes	Date

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 DIVISION OF STATE OPERATIONS  
 SECRETARY OF STATE