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SECRETARY OF STATE
TALL AHASSEE FISHER



COVER LETTER

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

OVER THE T	FOMMING OF MACKSONIVILLE INV	_		
SUBJECT: ELITE	OWING OF JACKSONVILLE, INC (PROPOSED CORPORA	J. TE NAME – <u>MUST INCL</u>	UDE SUFFIX)	
Enclosed are an orig	inal and one (1) copy of the artic	les of incorporation and	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 PY REQUIRED	
FROM: _GREG FORRON				
Name (Printed or typed)				
	5945 ST. AUGUSTINE ROAD	Address		
	JACKSONVILLE, FL. 32207 City,	State & Zip		
	904 393-7978	alanhana 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:

ELITE TOWING OF JACKSONVILLE, INC.

ARTICLE II PRINCIPAL OFFICE

The principle <u>street</u> address and mailing address, if different is:

5945 ST. AUGUSTINE ROAD JACKSONVILLE, FL. 32207

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TOWING OF VEHICLES

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): GREG FORRON, PRESIDENT 5945 ST. AUGUSTINE ROAD, JACKSONVILLE, FL. 32207

CELESTE FORRON, VICE PRESIDENT 5945 ST. AUGUSTINE ROAD, JACKSONVILLE, FL.32207

AARON FORRON, SECRETARY

5945 ST. AUGUSTINE ROAD, JACKSONVILLE, FL. 32207

ARTICLE VI REGISTERED AGENT

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

GREG FORRON 5945 ST. AUGUSTINE ROAD JACKSONVILLE, FL. 32207

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is: GREG FORRON 5945 ST. AUGUSTINE ROAD JACKSONVILLE, FL. 32207

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 Agent Date

O 4 - 64

O 4 - 64

Signature/Incorporator Date