# PO8000059859

(Re	equestor's Name)	
(Ac	ldress)	
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(Ci	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nam	e)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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# CORPORATE FILING SERVICE

3320 SW 87<sup>TH</sup> AVENUE

MIAMI, FL 33165 (305) 552-5973

for the transfer

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

Examiner's Initials

	· · · · · · · · · · · · · · · · · · ·	Office Use Only
COR	PORATION NAME(S) & DOCUM	ENT NUMBER(S), (if known):
1	50/50 Tou	UING & RECOVERING
2. <u> </u>	DUC.	
3.	(Corporation Name)	(Document #)
<u></u>	(Corporation Name)	(Document #)
	(Corporation Name)  Walk in Pick up time  Mail out Will wait	(Document #)  Certified Copy  Photocopy  Certificate of Status
	Profit Not for Profit Limited Liability Domestication Other	AMENDMENTS  Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger
<u>01</u>	CHER FILINGS  Annual Report Fictitious Name	REGISTRATION/QUALIFICATION  Foreign Limited Partnership Reinstatement Trademark Other

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## ARTICLES OF INCORPORATION

08 JUN 19 AM 8: 44

SECRETARY OF STATE TALLAHASSEE, FLORIDA

The undersigned Incorprator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

#### **ARTICLE I – NAME**

The name of the corporation shall be: 50/50 TOWING & RECOVERY INC.

962 N. DAVIS PKWY #35 FLORIDA CITY, FL. 33034

#### **ARTICLE II- PRINCIPAL OFFICE**

The principal place of business and mailing of this corporation shall be:

50/50 TOWING & RECOVERY INC. 962 N. DAVIS PKWY #35 FLORIDA CITY, FL. 33034

#### **ARTICLE III- SHARES**

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 500 shares per \$1

#### ARTICLE IV- INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

IVELISSE GARCIA 962 N. DAVIS PKWY #35 FLORIDA CITY, FL. 33034

### **ARTICLE V- INCORPORATOR**

The name and street address of the incorporator to these Articles of Incorporation is: <a href="IVELISSE GARCIA">IVELISSE GARCIA</a>

962 N. DAVIS PKWY #35 FLORIDA CITY, FL. 33034

The under signed incorporator has executed these Articles of Incorporation this <u>18</u> \_ Day of JUNE \_\_, 2008.

VSignature
IVELISSE GARCIA
PRESIDENT

## **ARTICLE VI- DIRECTOR(S)**

The name(s) and street address(es) of these Articles of Incorporation is (are):

PRESIDENT:

<u>IVELISSE GARCIA</u> 962 N. DAVIS PKWY #35 FLORIDA CITY, FL. 33034

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08 JUN 19 AH 8: 44 CERTIFICATE OF DESIGNATION

OF REGISTERED AGENT/ REGISTERED OFFICE SECRETARY OF STATE TALLAHASSEE. FLORIDA

Having been named as Registered Agent and to accept service of process for the above stated corporation at place designed in this certificate, I hereby accept the appointment as Registered Agent and agree to act in this capacity. I further agree to comply with the provisions of all statues related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.

LASSE GARCIA

Registered Agent Signature

DATE: 6/18/08