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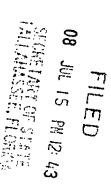
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PICK-UP WAIT MAIL				
(Business Entity Name)				
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Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				





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COVER LETTER

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

SUBJECT: Tony's /	Auto Clinic II Inc (PROPOSED CORPOR	ATE NAME – <u>MUST INCI</u>	LUDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	i a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status DPY REQUIRED
FROM: An	nthony Marques	(Printed or typed)	
	65 N Florida Ave	Address	
	Inverness, FI 34453	, State & Zip	
	352-344-5121	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:

Tony's Auto Clinic II In C

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

65 N Florida Ave Inverness, Fi 34453

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Automotive Repair

ARTICLE IV SHARES

The number of shares of stock is:

10,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Anthony Marques-President 5992 E Dell Lane, Inverness, FI 34452

Michelle Marques-VP/Secretary 5992 E Dell Lane, Inverness, FI 34452

ARTICLE VI REGISTERED AGENT

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

Anthony Marques 5992 E Dell Lane Inverness, FI 34452

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Anthony Marques 5992 E Dell Lane Inverness, FI 34452 ARTICLE VIII- EFFECTIVE DATE JULY 1, 2008

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

7/13/08

Signature/Incorporator Date

SECRETARY OF STATE