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COVER LETTER

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

SUBJECT: ALL	AUTO GLASS CORPORATION (PROPOSED CORPOR	 ATE NAMÉ – <u>MUST INCI</u>	LUDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the art	icles 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	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED
FROM:	ALL AUTO GLASS CORPOR. Name	ATION e (Printed or typed)	
	11010 SW 7th Street	Address	
	Miami, FL 33174	y, State & Zip	
	(786) 514 3540	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:

ALL AUTO GLASS CORPORATION

ARTICLE II PRINCIPAL OFFICE

The principal **street** address and mailing address, if different is: 11010 SW 7 STREET

MIAMI, FL 33174

<u>ARTICLE III PURPOSE</u>

The purpose for which the corporation is organized is: SERVICES

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s): YACEL LUACES - PRESIDENT 11010 SW 7 STREET MIAMI, FL 33174

ARTICLE VI REGISTERED AGENT

The <u>name and Florida street address</u> (P.O. Box **NOT** acceptable) of the registered agent is: YACEL LUACES
11010 SW 7 STREET
MIAMI, FL 33174

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is: YACEL LUACES
11010 SW 7 STREET
MIAMI, FL 33174

*************	*********
Having been named as registered agent to accept service of process for the certificate, I am familiar with and accept the appointment as registered agen	ne above stated corporation at the place designated in this nt and agree to act in this capacity
1-1	2/4/09
Signature/Registered Agent	Date
	2/4/09
Signature/Incorporator	Date

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STUBBLE TARY OF STATE

AND SEFE, FLORIDA