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APPROVED
AND
FILED
10 APR 19 PM 1:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

VH
two 17990

COVER LETTER

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

SUBJECT: CERTIFICATE OF DOMESTICATION FOR
PROCARE AUTOMOTIVE, INC.

Enclosed is an original and one (1) copy of the Certificate of Domestication and a check for:

FEES:

Certificate of Domestication	\$ 50.00
Articles of Incorporation and Certified Copy	\$ 78.75
Total to domesticate and file	\$128.75

OPTIONAL:

Certificate of Status \$ 8.75

137.50

PROCARE AUTOMOTIVE INC.
Name (printed or typed)

203 IRVING AVE NORTH
Address

LEHIGH ACRES FL. 33971
City, State & Zip

479-739-5002
Daytime Telephone Number

GRADY GRETTA@HOTMAIL.COM
E-mail address: (to be used for future annual report notification)



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 13, 2010

GRADY NORDEAN
203 IRVING AVE N
LEHIGH ACRES, FL 33971-1658

SUBJECT: PROCARE AUTOMOTIVE, INC.
Ref. Number: W10000017990

We have received your document for PROCARE AUTOMOTIVE, INC. and your check(s) totaling \$137.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6962.

Valerie Herring
Regulatory Specialist II
New Filing Section

Letter Number: 510A00009104

CERTIFICATE OF DOMESTICATION

APPROVED
AND
FILED

The undersigned, GRADY R NORDEAN,
(Name)

10 APR 19 PM 1:14
PRES.

of PROCARE AUTOMOTIVE, INC.
(Corporation Name)

(T) SECRETARY OF STATE
TALLAHASSEE, FLORIDA
a foreign corporation.

in accordance with s. 607.1801, Florida Statutes, does hereby certify:

1. The date on which corporation was first formed was 21 JANUARY, 1997.
2. The jurisdiction where the above named corporation was first formed, incorporated, or otherwise came into being was STATE OF ARKANSAS.
3. The name of the corporation immediately prior to the filing of this Certificate of Domestication was PROCARE AUTOMOTIVE, INC.
4. The name of the corporation, as set forth in its articles of incorporation, to be filed pursuant to s. 607.0202 and 607.0401 with this certificate is PROCARE AUTOMOTIVE RESTORATION, INC.
5. The jurisdiction that constituted the seat, siege social, or principal place of business or central administration of the corporation, or any other equivalent jurisdiction under applicable law, immediately before the filing of the Certificate of Domestication was 2400 ROGERS AVE. FORT SMITH AR. 72901
6. Attached are Florida articles of incorporation to complete the domestication requirements pursuant to s. 607.1801.

I am PRES., of PROCARE AUTOMOTIVE, INC.

and am authorized to sign this Certificate of Domestication on behalf of the corporation and have done

so this the 9 day of APRIL, 2010.

Grady R Nordean
(Authorized Signature)

Filing Fee:

Certificate of Domestication	\$ 50.00
Articles of Incorporation and Certified Copy	\$ 78.75
Total to domesticate and file	\$128.75

ARTICLES OF INCORPORATION
IN COMPLIANCE WITH CHAPTER 607, F.S.

ARTICLE I NAME

THE NAME OF THE CORPORATION SHALL BE: **PROCARE AUTOMOTIVE RESTORATION INC.**

ARTICLE II PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS/MAILING ADDRESS IS:

**203 IRVING AVE. NORTH
LEHIGH ACRES FL. 33971**

ARTICLE III PURPOSE

THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED:

AUTOMOTIVE RESTORATION CONSULTANT.

ARTICLE IV SHARES

THE NUMBER OF SHARES OF STOCK IS: **10 SHARES**

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

THE NAME(S) AND ADDRESS(ES) AND SPECIFIC TITLES:

GRADY R NORDEAN 203 IRVING AVE NORTH LEHIGH ACRES FL. 33971	MARGARET F NORDEAN 203 IRVING AVE. NORTH LEHIGH ACRES FL 33971	ROSEAN NORDEAN 1702 TIFFANY PINKS CIRCLE WEST JACKSONVILLE FL 32225
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ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

THE NAME AND FLORIDA STREET ADDRESS (P.O. BOX NOT ACCEPTABLE) OF THE REGISTERED AGENT IS:

GRADY R NORDEAN
203 IRVING AVE NORTH
LEHIGH ACRES FL 33971


Mr. Grady Nordean
203 Irving Ave. N.
Lehigh Acres, FL 33971-1658

ARTICLE VII INCORPORATOR

THE NAME AND ADDRESS OF THE INCORPORATOR IS:

GRADY R NORDEAN
203 IRVING AVE NORTH
LEHIGH ACRES FL. 33971

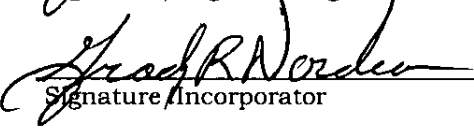
HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I AM FAMILIAR WITH AND ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY.



Signature/Registered Agent

4/9/2010

Date



Signature/Incorporator

4/9/2010

Date

10 APR 19 PM 1:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
APPROVED
AND
FILED