Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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To: Division of Corporations Fax Number : (850) 617-6381 From: Account Name : LAZARUS CORPORATE FILING SERVICE, INC. Account Number: I2000000019 Phone : (305)552-5973 Fax Number : (305)220-1440 **Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.** Email Address: FLORIDA PROFIT/NON PROFIT CORPORATION WHEELS OF AMERICA INC Ccrtificate of Status

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H10000261166 ARTICLES OF INCORPORATION

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

<u> ARTICLE I – NAME</u>

The name of the corporation shall be:

WHEELS OF AMERICA INC EFFECTIVE DATE: 01/01/2011 ARTICLE II – PRINCIPAL OFFICE

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

14332 EW 38 Terr Wigmi FL 33175

<u>ARTICLE III – SHARES</u>

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100

ARTICLES IV - INITIAL REGISTERED AGENT

The name and address of the initial registered agent is:

Manuel A Garcia 14332 SW 38 Terr Mioimi FC 33175

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ARTICLE V – INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation is:

Manuel A Garcia

14332 SW 38 Terr Wiami FL 33175

The undersigned incorporator has executed these Articles of Incorporation this 6 day of DECEMBEY 20 10.

ARTICLE VI- DIRECTOR (S)

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

Manuel A. GARCIA (P) Hugo A Garcia

CERTIFICATE OF DESIGNATION OF REGISTERED REGISTERED OFFICE

Having been named as Registered Agent and to accept service of process for the above stated corporation at place designated 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 statutes 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.

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