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# 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 : BLANCO ACCOUNTING I, INC.
Account Number : I20100000060
Phone : (305)828-1148
Fax Number : (305)828-1709

**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**
**PUERTO PADRE AUTO SALES,INC.**

| | |
|---|---|
| Certificate of Status | 0 |
| Certified Copy | 0 |
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03/25/11

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**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: PUERTO PADRE AUTO SALES, INC.

***ARTICLE II PRINCIPAL OFFICE***

Principal street address:
9695 N W 79 AVE BAY 1-2
HIALEAH GARDENS FL 33016

Mailing address, if different is:
9695 N W 79 AVE BAY 1-2
HIALEAH GARDENS FL 33016

***ARTICLE III PURPOSE***
The purpose for which the corporation is organized is:
ALL AND ANY LAWFUL BUSINES

***ARTICLE IV SHARES***
The number of shares of stock is: 100

***ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS***

Name and Title: MAYTE NAPOLES President
Address: 9695 N W 79 AVE BAY 1-2
HIALEAH GARDENS FL 33016

Name and Title: JUAN E ARDUENGO Vicepresident
Address: 9695 N W 7 AVE BAY 1-2
HIALEAH GARDENS FL 33016

Name and Title:
Address:

Name and Title:
Address:

Name and Title:
Address:

Name and Title:
Address:

***ARTICLE VI REGISTERED AGENT***
The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:
Name: MAYTE NAPOLES
Address: 9695 N W 79 AVE BAY 1-2
HIALEAH GARDENS FL 33016

***ARTICLE VII INCORPORATOR***
The name and address of the Incorporator is:
Name: MAYTE NAPOLES
Address: 9695 N W 79 AVE BAY 1-2
HIALEAH GARDENS FL 33016

***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***

Required Signature/Registered Agent — Date: 03/25/2011

***I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.***

Required Signature/Incorporator — Date: 03/25/2011