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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

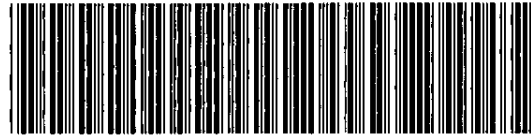
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

NOV 14 PM 4:24

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NOV 14 2011

**COVER LETTER**

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

**SUBJECT: Enrique Auto-Body Specialist Inc**  
**(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)**

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

\$70.00 Filing Fee  
 \$78.75 Filing Fee & Certificate of Status

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input checked="" type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
<b>ADDITIONAL COPY REQUIRED</b>	

FROM: Mr. Enrique Lo-A-Njoe  
Name (Printed or typed)

2401 John P Lyons Ln. Unit # A21 & A23  
Address

Hallandale FL 33009  
City, State & Zip

(305) 748-7473  
Daytime Telephone number

el2510@hotmail.com  
E-mail address: (to be used for future annual report notification)

**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** ENRIQUE AUTO-BODY SPECIALIST INC.  
The name of the corporation shall be:

**ARTICLE II PRINCIPAL OFFICE**  
Principal street address: 2401 John P Lyons Lane  
Unit # A-21 & A-22  
Hallandale FL 33009  
Mailing address, if different is: N/A

**ARTICLE III PURPOSE**  
The purpose for which the corporation is organized is:  
**This is an auto-body work shop. Repairs will be done to the body of vehicles.**

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

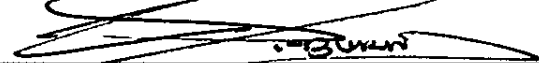
**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: <u>Enrique Lo-A-Njoe (President)</u>	Name and Title: <u>N/A</u>
Address: <u>2401 John P Lyons Ln A-21 &amp; A-23</u>	Address: _____
<u>Hallandale, FL 33009</u>	_____
_____	_____
Name and Title: <u>N/A</u>	Name and Title: <u>N/A</u>
Address: _____	Address: _____
_____	_____
Name and Title: <u>N/A</u>	Name and Title: <u>N/A</u>
Address: _____	Address: _____
_____	_____


**ARTICLE VI REGISTERED AGENT**  
The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:  
Name: Christopher Silburn  
Address: 7526 SW 6th Street  
N. Lauderdale FL 33068

**ARTICLE VII INCORPORATOR**  
The name and address of the Incorporator is:  
Name: Enrique Lo-A-Njoe  
Address: 2401 John P Lyons Lane A-21 & A-23  
Hallandale FL 33009

*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*

 November 7, 2011  
Required Signature/Registered Agent Date

*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.*

 November 7, 2011  
Required Signature/Incorporator Date