

P13000004992

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

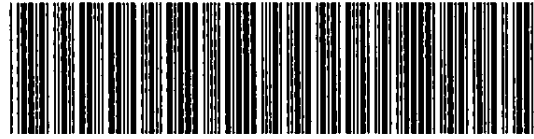
(Business Entity Name)

(Document Number)

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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

MD 1/15

**COVER LETTER**

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

**SUBJECT: PROMPT TOWING AND RECOVERY 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: Joseph Saladino**  
Name (Printed or typed)  
**11139 Tamiami Trail**  
Address  
**Punta Gorda, Florida 33955**  
City, State & Zip  
**941-639-4000**  
Daytime Telephone number  
**promptjoe@yahoo.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

The name of the corporation shall be: PROMPT TOWING AND RECOVERY INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

11139 TAMIAMI TRAIL
PUNTA GORDA
FLORIDA 33955

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ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES 100

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: JOSEPH SALADINO P Name and Title:

Address 11139 TAMIAMI TAIL Address:
PUNTA GORDA
FLORIDA 33955

Name and Title: Name and Title:

Address Address:

Name and Title: Name and Title:

Address Address:

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_  
 Address \_\_\_\_\_ Address: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: JOSEPH SALADINO  
 Address: 11139 TAMIAMI TRAIL  
PUNTA GORDA, FL 33955

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**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: JOSEPH SALADINO  
 Address: 11139 TAMIAMI TRAIL  
PUNTA GORDA, FL 33955

*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*

Joseph Saladino Required Signature/Registered Agent 1-11-2013 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.*

Joseph Saladino Required Signature/Incorporator 1-11-2013 Date