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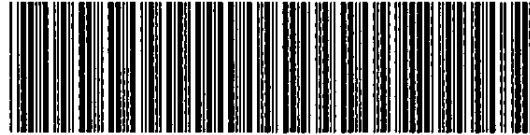
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TALLAHASSEE, FLORIDA

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J. Shivers FEB 15 2013

## COVER LETTER

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

**SUBJECT: SG AUTO SALVAGE CORP.**

Enclosed are an original and one (1) copy of the articles of incorporation.

**FROM:**

Name: NESTOR CARDENAS

E-mail address: cibotcorp@hotmail.com

Address: 18555 SW. 216<sup>th</sup> ST

City, State & Zip: MIAMI, FLORIDA 33170

Daytime Telephone number 305 971 1422

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TALLAHASSEE, FLORIDA

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## **ARTICLES OF CORPORATION**

### **ARTICLE I - NAME**

The name of this corporation is:

**SG AUTO SALVAGE CORP.**

With the principal place of business located at:

**4940 FISHERMANS DRIVE # B  
COCONUT CREEK FL. 33063**

### **ARTICLE II - PURPOSE**

This corporation shall have the perpetual existence and may engage in any and under the laws of the United States and the State of Florida.

### **ARTICLE III - CAPITAL STOCK**

This corporation is authorized to issue 1000 shares of One Dollar (\$1.00) par value common stock.

### **ARTICLE IV- PREEMPTIVE RIGHTS**

Every shareholder, upon the sale for cash or any new common stock of this corporation, shall have the right to purchase their pro rata share (as nearly as may be done without issuance of fractional shares), at the price at which it is offered to others.

### **ARTICLE V - INITIAL REGISTERED OFFICE**

The street address of the registered office of this corporation is:

**4940 FISHERMANS DRIVE # B  
COCONUT CREEK FL. 33063**

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## **ARTICLE VI - INITIAL BOARD OF DIRECTORS**

This corporation shall have One (1) director initially. The number of directors may be either increased or diminished from time to time by law.

The initial director of this Corporation is:

**GUSTAVO RAMOS**

4940 FISHERMANS DRIVE # B  
COCONUT CREEK FL. 33063

## **ARTICLE VII - INCORPORATOR**

The name of the person signing this articles is:

**GUSTAVO RAMOS**

4940 FISHERMANS DRIVE Apt B  
COCONUT CREEK FL. 33063

## **ARTICLE VIII - RESTRICTION ON THE TRANSFER OF STOCKS**

Shares of capital stock of this Corporation shall be issued initially to the following person in the amount set opposite his name:

**GUSTAVO RAMOS**

4940 FISHERMANS DRIVE Apt B  
COCONUT CREEK FL. 33063

100 Shares

**STEFANO ALFONSI**

4940 FISHERMANS DRIVE Apt B  
COCONUT CREEK FL. 33063

900 Shares

Shares held by the initial shareholders listed above may not be resold or otherwise transferred to other unless such shares are first offered to the remaining shareholders or to this corporation. The price and terms at which, and the time within which, such shares may be offered and sold shall be further specified by written agreement among all the shareholders and this corporation.

#### **ARTICLE IX - INDEMNIFICATION**

The corporation shall indemnify any officer or director, or any former officers or directors to the full extent permitted by law.


#### **ARTICLE X - MANAGEMENT OF CORPORATION SHAREHOLDERS**

All Corporate powers shall be exercised by or under the authority of, and the business and affairs of this corporation shall be managed under the director of shareholders of this corporation.

#### **ARTICLE XI - BY LAWS**

The power to adopt, alter, amend or repeal by-laws shall be vested in the Board of Directors and the Shareholder.

In witness whereof, the undersigned incorporator has executed these articles of incorporation this :  
1-Feb-13

  
\_\_\_\_\_  
GUSTAVO RAMOS  
President

**CERTIFICATE OF DESIGNATION REGISTERED  
AGENT/REGISTERED OFFICE**

Pursuant to the provisions of section 607.0501 or 617.0501, Florida Statutes,  
the undersigned corporation, organized under the laws of the State of Florida,  
submits the following statement in designating the registered office/registered agent,  
in the State of Florida.

1. The name of the corporation is:

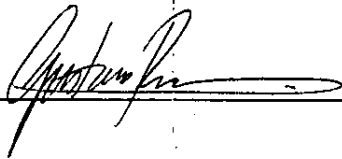
SG AUTO SALVAGE CORP.

2. The name of the registered agent and office is:

GUSTAVO RAMOS  
4940 FISHERMANS DRIVE Apt B  
COCONUT CREEK FL. 33063

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 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  
RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES,  
AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION  
AND REGISTERED AGENT.

SIGNATURE: \_\_\_\_\_



DATE: \_\_\_\_\_

2-9-13

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TALLAHASSEE FLORIDA

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