

JAN/29/2014 WED 02:33 PM
1/29/2014

Division of Corporations

P. 01

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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(((H14000023043 3)))



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Division of Corporations
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Email Address: _____

**FLORIDA PROFIT/NON PROFIT CORPORATION
PLATINUM COLLISION CENTER, CORP.**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

RECEIVED

14 JAN 29 PM 2:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

14 JAN 29 PM 2:42

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1/30/14

JAN/29/2014/WED 02:23 PM

FAX No.

P. 002
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SECRETARY OF STATE
DIVISION OF CORPORATIONS

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

14 JAN 29 PM 2:42

ARTICLE I NAME
The name of the corporation shall be: PLATINUM COLLISION CENTER, CORP.

ARTICLE II PRINCIPAL OFFICE
Principal street address

755 NW 20TH ST
MIAMI, FL 33127

Mailing address, if different is:

755 NW 20TH ST
MIAMI, FL 33127

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

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

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: (P) JAZMINE RAMIREZ
Address: 755 NW 20TH ST
MIAMI, FL 33127

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

JAN/29/2014/WED 02:23 PM

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P. 003

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
(cont'd)

14 JAN 29 PM 2:42

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: JAZMINE RAMIREZ
Address: 755 NW 20TH ST
MIAMI, FL 33127

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: JAZMINE RAMIREZ
Address: 755 NW 20TH ST
MIAMI, FL 33127

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

Jazmine Ramirez
Required Signature/Registered Agent

1/29/2014

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.

Jazmine Ramirez
Required Signature/Incorporator

1/29/2014

Date