

MAY/07/2014/WED 11:56 AM
5/7/2014

P14000040695 P.001/003
FAX No
Division of Corporations

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 : EXPRESS CORPORATE FILING SERVICE INC.
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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

RECEIVED
14 MAY -7 PM 2:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA PROFIT/NON PROFIT CORPORATION
QUALITY SERVICE TOWING, INC.

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

FILED
14 MAY -7 PM 4:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAY - 8 2014

A. DUNLAP

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:

QUALITY SERVICE TOWING, INC.**ARTICLE II PRINCIPAL OFFICE**

Principal street address

**7175 NW 72 STREET
MIAMI, FL 33147**

Mailing address, if different is:

**16851 NW 87 CT
MIAMI LAKES, FL 33018****ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL BUSINESS**ARTICLE IV SHARES**

The number of shares of stock is:

100**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: **RODOLFO VARELA (P/D)**

Address

**16851 NW 87 CT
MIAMI LAKES, FL 33018**

Name and Title:

Address:

Name and Title: **LUIS GRASS (V/D)**

Address

**16851 NW 87 CT
MIAMI LAKES, FL 33018**

Name and Title:

Address:

Name and Title:

Address

Name and Title:

Address:

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P. 003/003

(cont.)

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: RODOLFO VARELA
Address: 16851 NW 87 CT
MIAMI LAKES, FL 33018

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: RODOLFO VARELA
Address: 16851 NW 87 CT
MIAMI LAKES, FL 33018


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

05/06/2014

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.


Required Signature/Incorporator

05/06/2014

Date