

12/22/2012 7:00

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Florida Department of State  
Division of Corporations  
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**FLORIDA PROFIT/NON PROFIT CORPORATION  
L.M. AUTO COLLISION CENTER INC**

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

*K 02/11/15*

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**ARTICLES OF INCORPORATION**

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

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**ARTICLE I NAME:** The name of the corporation is:L.M. AUTO COLLISION CENTER INC**ARTICLE II PRINCIPAL OFFICE:**

The principal street address and mailing address is:

7040 SW 44 STREETMIAMI, FLORIDA 33155**ARTICLE III SHARES:** The number of shares of stock is:100**ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:**OSVALDO MARTINEZ (PRESIDENT)LAYDEN MONTESINO (VICE PRESIDENT)**ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:**

The name and Florida street address (PO Box not acceptable) of the registered agent is:

Osvaldo Martinez7040 SW 44 STMiami FL 33155**ARTICLE VI INCORPORATOR:** The name and address of the Incorporator is:Osvaldo Martinez7040 SW 44 STMiami FL 33155

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Required Signatures:

*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*

*Osvaldo Hastings*  
Registered Agent

*FEB 10, 2015*  
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.*

*Osvaldo Hastings*  
Incorporator

*FEB 10, 2015*  
Date

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS

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