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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 120000000019

Phone

: (305)552-5973 Fax Number : (305)675~5944

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

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## FLORIDA PROFIT/NON PROFIT CORPORATION NITO TOWING CO.

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

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

ARTICLE I NAME: The name of the corporation is:				
Nito towing Co.				
ARTICLE II PRINCIPAL OFFICE:	_			
The principal street address and mailing address is:				
1933 Sw. 123 ave		[		
Miani Fla 33/75				
Might Fla 50175	'			
ARTICLE III SHARES: The number of shares of stock is: //O				
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:				
Lorenzo Alderete (P)				
	5 JUN			
	N 25			
	<b>-</b>	1		
	AH ID:			
ARTICLE V INTUAL REGISTERED AGENT AND STREET ADDRESS:	37	12		
The name and Florida street address (PO Box not acceptable) of the registered agent is:				
Lorenzo Alderete				
1933 S.W. 123 ave.				
Migni, Flg 33175				
ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:				
LORENZO ALDERETE				
1933 SW 123 AVE				

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## Required Signatures:

Having been named as registered agent to accept servi	ice of process for the above state
corporation at the place designated in this certificate, appointment as registered agent and agree	I am familiar with and accept th
Let	
Registered Agent	Date
I submit this document and affirm that the facts stated the false information submitted in a document to the D third degree felony as provided for in s.817.155, F.S.	epartment of State constitutes a
Theorparator	Date