

**P150002277853**

**Florida Department of State  
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**FLORIDA PROFIT/NON PROFIT CORPORATION**

**PRO AUTO TOUCH UPS CORP**

Certificate of Status	0
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## ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation Under the Florida Business Corporation Act, Hereby adopt(s) the following Articles of Incorporation.

### ARTICLE I NAME

The name of the corporation shall be:

PRO AUTO TOUCH UPS CORP

### ARTICLE II PRINCIPAL OFFICE

Principal place of business and mailing address of this corporation shall be

14397 SW 95 LANE

MIAMI FL 33186

### ARTICLE III SHARES

The number of shares of stock that this corporation is authorized have outstanding at any one time is: 500 shares value of \$ 1.00

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ARTICLE IV

INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is;

JAVIER VALEA  
14397 SW 95 LANE  
MIAMI FL 33186



ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) If incorporator(s) to these Article of Incorporation is (are)

JAVIER VALEA 14397 SW 95 LANE  
MIAMI FL 33186

ARTICLE VI DIRECTORS

The name(s) an the street address(es) of the director(s) these Articles of Incorporation is (are)

JAVIER VALEA 14387 SW 95 LANE  
MIAMI FL 33186

The undersigned incorporator(s) has (have) executed these Articles of Incorporation in AUGUST 16,2015



JAVIER VALEA

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

Pursuant to the provision of the sections 607.0501, 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:

PRO AUTO TOUCH UPS CORP

2.- The name and address of the registered agent and office Name

JAVIER VALEA


P.O.Box not acceptable

14397 SW 95 LANE

City State Zip

MIAMI FL 33186

HAVING BEEN NAME AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATED, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY I FURTHER AGREE TO COMPLY WHIT THE PROVISION S OF ALL STATUTES RELATING THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.



16 DAYS SEPTEMBER 2015

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