Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

0

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Account Number: 120000000019

Phone

Email Address:

: (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.

FLORIDA PROFIT/NON PROFIT CORPORATION TRANSCARS USA INC Certificate of Status Ccrtified Copy

Page Count

Estimated Charge

H15000230205

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

ARTICLE I NAME: The name of the corporation is:	
Transcars USA Inc	
ARTICLE II PRINCIPAL OFFICE:	
The principal street address and mailing address is:	
4525 5W 325 F MiAM. FL 33155	
•	
ARTICLE UI SHARES: The number of shares of stock is: 100	
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:	
Michel Carrillo Gomez (P)	
Michel Carrillo Gomez (P) Pedro Rosales Bernardo (VP)	
	,
	S T
्रिक 22 - 1 ज्यान	
ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:	
The name and Florida street address (PO Box not acceptable) of the registered agent is Michel Carrillo Gomez	လွှ
7525 SW 32st Miami FL 33155	
Miami FL 33155	
ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:	
Michel Carrillo Gomez	
7525 SW 32 S+	

H15000230205

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

Registered Agent

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.

Incorporator

Date