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2/3/20

FA No.

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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FLORIDA PROFIT/NON PROFIT CORPORATION
TUNE RITE AUTO BODY CORP

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

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FAX No.

P. 002

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CLERK OF STATE
TALLAHASSEE, FLORIDA

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: TUNE RITE AUTO BODY CORP

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

5460 REESE RD

DAVIE, FL 33314

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY AND ALL LAWFULL BUSINESS

ARTICLE IV SHARES

SHARES: 100
The number of shares of stock is: _____

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: DOMINGO HERNANDEZ (P)

Name and Title: _____

Address 5460 REESE RD

Address: _____

DAVIE, FL 33314

Name and Title: JULIO DE BRIGARD (V/P)

Name and Title: _____

Address 5460 REESE RD

Address: _____

DAVIE, FL 33314

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

ARTICLE VI REGISTERED AGENTThe name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: DOMINGO HERNANDEZ
Address: 5460 REESE RD
DAVIE, FL 33314

ARTICLE VII INCORPORATORThe name and address of the Incorporator is:

Name: DOMINGO HERNANDEZ
Address: 5460 REESE RD
DAVIE, FL 33314

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

02/03/2016

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.817.153, F.S.

Required Signature/Incorporator

02/03/2016

Date

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DEPARTMENT OF STATE
CORPORATION DIVISION