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Division of Corporations

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Account Name : FASTKIT CORP Account Number : I20100000009 : (305)599-0839 Phone Fax Number : (305)592-9591

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FLORIDA PROFIT/NON PROFIT CORPORATION EGO COLLISION CENTER CORP

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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 corpora	ion shall be: EGO COLLISION CI	ENTER CORP	
ARTICLE II PRINCIPAL OFFICE Principal street address 7835 NW 53TH ST UNIT I		Mailing address	, if different is:
		7835 NW 53TH ST UN	7835 NW 53TH ST UNIT I
DORAL, FL 33166		DÓRAL, FL 33166	
ARTICLE III PURPO The purpose for which t	AU ne corporation is organized is:	TO REPAIRS	
			d
			EL W
	LOFFICERS AND/OR DIRECTO	<i>Rs</i> Name and Title:	Y 12 AM 10:59 TARY OF STATE ASSEE, FLORIDA
Address	8095 NW 8 ST APT 205	Address:	
	MIAMI, FL 33126		
	PRESIDENT		
Name and Title		Name and Title:	
Address		Address:	
Name and Title		Name and Title:	
Address		Address:	
	·		

Naiwe a	nd Title:	Name and Title:
Addres	35	Address:
	·	
18 TV 7 7 VI	REGISTERED AGENT	
The name and l	Florida street address (P.O. Box NOT acceptable)	of the registered agent is:
Name:	MARLY GOMEZ	
	8095 NW 8 ST APT 205	20 A
	MIAMI, FL 33126	Y 12 A
ARTICLE VII	<u>INCORPORATOR</u>	MAY 12 AH 10: SECRETARY OF ST SELAHASSEE FLO
The name and	address of the Incorporator is:	<u> </u>
Name;	MARLY GOMEZ	
Address:	8095 NW 8 ST APT 208	-
	MIAMI, FL 33126	_
Effective date,	EFFECTIVE DATE: if other than the date of filing; MAY 12, 2017 date is listed, the date must be specific and cont	(OPTIONAL) not be more than five days prior or 90 days after the
the document's	s effective date on the Department of State's records	ess for the above stated corporation at the place designated in
	Required Signature/Registered Agent	16912,17. *
document to the	المستقيد المستقيد	ra true. I am aware that the faitse information submitted in a
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