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DIVISION OF CORPORATIONS
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**FLORIDA PROFIT/NON PROFIT CORPORATION
MILLENNIUM TOWING INC.**

Certificate of Status	0
Certified Copy	1
Page Count	03
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STATE OF FLORIDA
TALLAHASSEE, FLORIDA

2018 MAR 29 AM 10:52

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K. PAGE

ARTICLES OF INCORPORATION

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

ARTICLE I NAMEThe name of the corporation shall be: MILLENNIUM TOWING INC.**ARTICLE II PRINCIPAL OFFICE**Principal street address

Mailing address, if different is:

814 E. 33 STREETHIALEAH, FL 33013**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: _____

ANY AND ALL LAWFUL BUSINESS**ARTICLE IV SHARES**The number of shares of stock is: SHARES: 100**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: SILVIA PALACIOS (P/D)

Name and Title: _____

Address 814 E. 33 STREET

Address: _____

HIALEAH, FL 33013Name and Title: JOSE CABRERA (T)

Name and Title: _____

Address 814 E. 33 STREET

Address: _____

HIALEAH, FL 33013

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: SILVIA PALACIOS
Address: 814 E. 33 STREET
HALEAH, FL 33013

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: SILVIA PALACIOS
Address: 814 E. 33 STREET
HALEAH, FL 33013

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 days prior or 90 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

Silvia Palacios
Required Signature/Registered Agent

03/28/2018
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.

Silvia Palacios
Required Signature/Incorporator

03/28/2018
Date