

# P19000041915

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

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To:

Division of Corporations  
Fax Number : (850)617-6381

From:

Account Name : BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.  
Account Number : 075350000353  
Phone : (800)221-2972  
Fax Number : (888)692-9256

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

## FLORIDA PROFIT/NON PROFIT CORPORATION TOWRAFFIC TOWING INC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$70.00

M SIMMONS

MAY 20 2019

**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: TOWRIFFIC TOWING INC**ARTICLE II PRINCIPAL OFFICE**Principal street address

Mailing address, if different is:

1693 SW 159th Ave1693 SW 159th AveSunrise, FL 33326Sunrise, FL 33326**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: Towing, Automotive Services**ARTICLE IV SHARES**The number of shares of stock is: 100**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: Lorenzo N Chance - Director

Name and Title: \_\_\_\_\_

Address 1693 SW 159th Ave

Address: \_\_\_\_\_

Sunrise, FL 33326

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Address: \_\_\_\_\_

FILED  
19 MAY 20 PM 4:07  
CLERK OF DISTRICT COURT  
JUDICIAL CIRCUIT IN AND FOR  
THE NINTH JUDICIAL CIRCUIT  
TALLAHASSEE, FLORIDA

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: Lorenzo N Chance  
Address: 1693 SW 159th Ave  
Sunrise, FL 33326

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Lorenzo N Chance  
Address: 1693 SW 159th Ave  
Sunrise, FL 33326

**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*

Lorenzo N Chance  
Required Signature/Registered Agent

05/20/2019

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.*

Lorenzo N Chance  
Required Signature/Incorporator

05/20/2019

Date