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Division of Corporations

Florida Department of State  
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To:

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From:

Account Name : BUSINESS WORLD TRANSACTIONS, INC.  
Account Number : 104512000707  
Phone : (305)803-2736  
Fax Number : (305)646-1527

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FLORIDA PROFIT/NON PROFIT CORPORATION  
TOMMY AUTO CLINIC, CORP.

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JUN 30 2020

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2020 JUN 29 AM 11:17

## ARTICLES OF INCORPORATION

*The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Act, hereby adopt(s) the following Articles of Incorporation.*

### ARTICLE I

#### NAME

The name of the corporation shall be: TOMMY AUTO CLINIC, CORP.

### ARTICLE II

#### PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

20804 N.W. 2 STREET  
PEMBROKE PINES, FL 33029

### ARTICLE III

#### PURPOSE

The purpose for which the corporation is organized is for 'Any and all lawful business'.

### ARTICLE IV

#### SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: One Thousand (1,000) shares of One Dollar (\$1.00) par value common stock, which shall be designated ☐ COMMON SHARES. ☐

### ARTICLE V

#### INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

MILTON T. ADAMES  
20804 N.W. 2 STREET  
PEMBROKE PINES, FL 33029

Prepared by: MILTON T. ADAMES  
20804 N.W. 2 STREET  
PEMBROKE PINES, FL 33029  
786 315-1669

Electronically Sent By: BUSINESS WORLD TRANS  
7951 S.W. 40 ST. (BIRD RD.) #201  
MIAMI, FL. 33155  
PH # (305) 267-4022

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**ARTICLE VI  
INCORPORATOR(S)**

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

MILTON T. ADAMES  
20804 N.W. 2 STREET  
PEMBROKE PINES, FL 33029

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this  
27 day of JUNE, 2020.

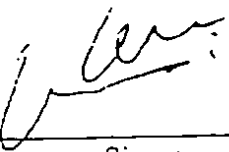
  
\_\_\_\_\_  
Signature

**ARTICLE VII  
OFFICER(S) AND DIRECTOR(S)**

The name(s) and street address(es) of the officer(s) and director(s) to these Articles of Incorporation is(are):

MILTON T. ADAMES  
20804 N.W. 2 STREET  
PEMBROKE PINES, FL 33029

DIRECTOR & PRESIDENT

  
\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

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## **CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE**

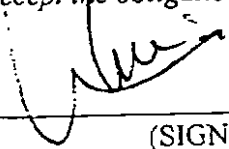
PURSUANT TO THE PROVISIONS OF SECTION 607, FLORIDA STATUTES, THE  
UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF  
FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE  
REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: TOMMY AUTO CLINIC, CORP.
2. The name and address of the registered agent and office is:

MILTON T. ADAMES  
20804 N.W. 2 STREET  
PEMBROKE PINES, FL 33029

*Having been named as registered agent and to accept service of process for the above stated  
corporation at the place designated in this certificate, I hereby accept the appointment as*

*registered agent and agree to act in this capacity. I further agree to comply with the provisions  
of all statutes relating to the proper and complete performance of my duties, and I am familiar  
with and accept the obligations of my position as registered agent.*

  
\_\_\_\_\_  
(SIGNATURE)

JUNE 27, 2020

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