Electronic Filing Cover Sheet

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To:			****
	Division of Corporations		
	Fax Number : (850)617-6381		
From			يو.
	Account Name : LAZARUS CORPORATE	FILING SERVICE, INC.	•
	Account Number : I200000000019 Phone : (305)552-5973		-:"
	Fax Number : (305)675-5944		٠. ۵ ,
	Email Address:		
	FLORIDA PROFIT/NON PR	OFIT CORPORATION	
-	FLORIDA PROFIT/NON PR TOWING ANI	OFIT CORPORATION OTM INC	
-	FLORIDA PROFIT/NON PR TOWING ANI Certificate of Status	OFIT CORPORATION	
-	FLORIDA PROFIT/NON PR TOWING ANI Certificate of Status Certified Copy	OFIT CORPORATION O TM INC 0 1	
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Help



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ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE 1 NAME: The name of the corporation is:

TOWING AND RM INC

ARTICLE II PRINCIPAL OFFICE:

The principal street address a	and mailing address is:
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6950 NW 1865T AFT 310 Hiallah # 33015.	
ARTICLE III SHARES: The number of shares of stock is:	100

ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:

Raul Tellechea Machado.	<u> </u>
(P)	

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:

The name and Florida street address (PO Box not acceptable) of the registered agent is:

Rail te	llechea	Had	rado	,			
6950 NW	186ST	APT	310	Hale	ah F	330/5	

ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:

Raul tellechen Machaei 10950 NW 1865T APT310 Hialah F/33015

Required Signatures:

Having been named as registered agent to accept service o corporation at the place designated in this certificate, I am appointment as registered agent and agree to a	f process for the above stated familiar with and accept the ct in this capacity
Registered Agent	01/3/2023 Date
I submit this document and affirm that the facts stated hereithe false information submitted in a document to the Depart third degree felony as provided for in s.817.155, F.S.	in are true. I am aware that ment of State constitutes a
Maw	01/18/2023 Date