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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 120000000019
Phone : (305)552-5973
Fax Number : (305)675-5944

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 UNIBODY COLLISION CENTER CORP

Certificate of Status	0
Certified Copy	1
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Estimated Charge	\$78.75

2024

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Corporate Filing Menu

Help

ARTICLES OF INCORPORATION In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:

UNIBODY COLLESTON CENTER CO	Ωŀ
ARTICLE II PRINCIPAL OFFICE:	<u> </u>
The principal street address and mailing address is:	
MTAULT TO WATERWAY DRIVE	
MIAMI FL 33/55	
ARTICLE III SHARES: The number of shares of stock is: (OC)	
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:	
(P) RICARDO LOIS PEREZ	
(M) ORALTA ELENA VIDAL	
S) ALDA PEREZ	
ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:	
The name and Florida street address (PO Box not acceptable) of the registered agent is:	
7181 N WATERWAY DRIVE	
MIAMI FL 33155	
ARTICLE VI INCORPORATOR, The	
ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:	
7/8/ N WATERWAY DRIVE	
MIAMI FL 33/55	

EIN: 99-5097459

Required Signatures:

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

Registered Agent

Dava

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 \$.817.155. F.S.

Incorporator