TRANSMIT (ALLETTER)

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

> 600001410696 -02/20/95--01103--014 *****70.00 *****70.00

SUBJECT: R & R ANTO WHOLE SALER, TWC.
(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for:

\$70.00 Filing Fee \$78.75

Filing Fee

& Certificate

\$122.50 Filing Fee

& Certified Copy

\$131.25

Filing Fee, Certified Copy & Certificate

95 FEB 20 W

FROM:

RAUL ROBERTO

Name (printed or typed)

1723 RANCHWOND DRIVE SOUTH

PUNION, FLORIDA 34698 City, State & Zip

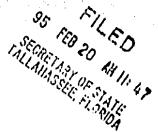
(813) 73Y- 2232- OR 73Y- 5257

Davtime Telephone number

T. BROWN FEB 2 1 1995

NOTE: Please provide the original and one copy of the articles.





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

ARTICLE I NAME

The name of the corporation shall be: R + R AUTO WHOLESALER, FNC.

ARTICLE II PRINCIPAL OFFICE

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

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

MR. RAUL ROBFRETO 1723 RANCHWOOD BRIUF SOUTH DUNEON, FLORION 34698

ARTICLE V INCORPORATORISI

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

MR. RAUL RUBURTO
1723 KMCHWOOD DRIUE SOUTH
DUNKOW, FLORION 34698

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

day of P6'8 WM, 1995.

Signature

Signature

Articles of Incorporation Filing Fee - \$35

Signature

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, 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: R ≠ R A∪	TO WHOLESALER, INC,
The name and address of the registered agent a	nd office is:
MR. RAVL ROBERTO	五百 田 五
(Name)	20 LE
1723 RANCHWOOD ORIL	70 ± 100
(P.O. Box not acceptable)	
DUNEOIN, FLORIDA 34 (City/State/Zip)	698 Bm 5
(City/State/Zip)	
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.	
Dew hale	<u>2//7/95</u>