

P9500040060
(SAMPLE LETTER OF TRANSMITTAL)

Date
May 10, 1995

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

400001450054
-05/18/95--01103-013
***122.50 ***122.50

Re: Sundance Auto Spa, Inc.
(name of corporation)

Gentlemen:

Enclosed please find the original and one copy of Articles of Incorporation, together with my check in the amount of \$122.50.

This represents the cost of the Filing Fees, Certified Copy of Articles of Incorporation and Fee for Registered Agent Designation for the above named corporation.

Very truly yours,

Steven A. G. H. H. H.
(individual's name)

Sundance Auto Spa, Inc.
(name of corporation)

MAILING ADDRESS OF CORPORATION		
3132 John Henry Parkway		
Orlando FL 32804		
PHONE		
(907) 222-0463		
Area Code	Number	Ext.

ARTICLES OF INCORPORATION

of

Sundance Auto Spa, Inc.
(name of corporation)

The undersigned subscriber(s) to these Articles of Incorporation, natural person(s) competent to contract, hereby form a corporation under the laws of the State of Florida.

ARTICLE I - CORPORATE NAME

The name of the corporation is:

Sundance Auto Spa, Inc.

ARTICLE II - DURATION

This corporation shall exist perpetually unless dissolved according to Florida law.

ARTICLE III - PURPOSE

The corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.

ARTICLE IV - CAPITAL STOCK

The corporation is authorized to issue Ten thousand shares (no more) of One Dollar(s) (\$ 1.00) par value Common Stock, which shall be designated "Common Shares."

ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT

The street address of the Initial Registered Agent office and the name of the Initial Registered Agent at that office is:

NAME	<u>Steven A. Culchrest</u>		
ADDRESS	<u>3132 John Koenig Parkway</u>		
CITY	<u>Orlando</u>	FLORIDA	ZIP <u>32804</u>

The principal office, if known, or the mailing address of the corporation is:

NAME	<u>Sundance Auto Spa, Inc.</u>		
ADDRESS	<u>3132 John Koenig Parkway</u>		
CITY	<u>Orlando</u>	FLORIDA	ZIP <u>32804</u>

ARTICLE VI - INITIAL BOARD OF DIRECTORS

This corporation shall have Two (2) directors initially. The number of directors may be either increased or diminished from time to time by the By-Laws, but shall never be less than one (1). The names and addresses of the initial director(s) of the corporation are as follows:

NAME	<u>Steven A. Culchrest</u>		
ADDRESS	<u>3192 Fort Thomas Way</u>		
CITY	<u>Orlando</u>	STATE <u>FL</u>	ZIP <u>32812</u>
NAME	<u>Charles Hernandez</u>		
ADDRESS	<u>4742 South Hill Street</u>		
CITY	<u>Orlando</u>	STATE <u>FL</u>	ZIP <u>32813</u>
NAME			
ADDRESS			
CITY		STATE	ZIP

ARTICLE VII - INCORPORATORS

The names and addresses of the incorporators signing these Articles of Incorporation are as follows:

NAME	Steven A. Gelchert		
ADDRESS	8392 Fort Thomas Way		
CITY	Orlando	STATE	FL ZIP 32822
NAME	Charles Hossain		
ADDRESS	4792 Southold Street		
CITY	Orlando	STATE	FL ZIP 32808
NAME			
ADDRESS			
CITY		STATE	ZIP

IN WITNESS WHEREOF, the undersigned subscriber(s) have executed these Articles of Incorporation this _____ day of _____, 19____.

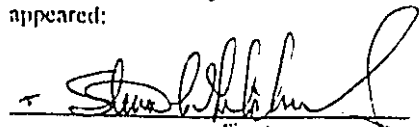
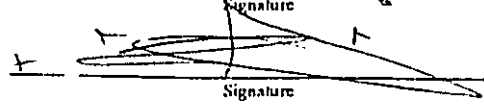
_____(Seal)

_____(Seal)

_____(Seal)

STATE OF FLORIDA)
COUNTY OF _____) SS

before me, a Notary Public authorized to take acknowledgments in the State and County set forth above, personally appeared:

	_____
Signature	Form of Identification
	_____
Signature	Form of Identification
_____	_____
Signature	Form of Identification

known to me and known to be the person(s) who executed the foregoing Articles of Incorporation, who acknowledged before me that _____ execute these Articles of Incorporation, that I relied upon the form of identification of the above named person as indicated opposite each name, and that an oath was not taken.

NOTARY RUBBER STAMP SEAL _____ Witness my hand and official seal in the County and State last aforesaid this _____ day of _____, 19_____.

Notary Signature _____

Printed Notary Signature _____

CERTIFICATE AND ACKNOWLEDGEMENT
OF REGISTERED AGENT

CERTIFICATE OF REGISTERED AGENT
OF

FILED
95 MAY 18 AM 8:53
TALLAHASSEE, FLORIDA

Seminole Auto Spa, Inc.
(name of corporation)

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted:
The above corporation, desiring to organize under the laws of the State of Florida with
its registered office as indicated in the Articles of Incorporation

at 3132 John Henry Highway
Orlando, FL 32838

has named Steven A. Gilbert
located at the aforesaid address, as its Registered Agent to accept service of process
within this state.

ACKNOWLEDGEMENT

Having been named as Registered Agent to accept service of process for the above
stated corporation at the place designated in this certificate, and being familiar with
the obligations of that position, I hereby accept to act in this capacity, and agree to
comply with the provisions of Florida Law in keeping open said office.

[Signature]
(registered agent)