## P95000056072

#### TRANSMITTAL LETTER

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

q mmmm +1.55-4.01690.1 -n7/19/95--n1017--004 -++++70.00

SUBJECT: Castle Automotive, Inc. (Proposed corporate issme - must include suffix) Enclosed is an original and one (1) copy of the articles of incorporation and a check for: × \$70.00 **♦78.75** 122.50 ■ \$131.25 Filing Fee Filing Fee Filing Fee & Centiled Copy Filing Fee, Certified Copy & Certificate & Certificate Additional Copy Required Tim Castle FROM: Name (printed or typed) 55 620-B Mt. Vernon Address Oldsmar, Florida 34677 ထ် City, State & Zio (813) 855-2693 Daytime Tolephone number

B. MEGISTER TILL 2 0 1995

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

#### ARTICLES OF INCORPORATION

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:

Castle Automotive, Inc.

ARTICLE II PRINCIPAL OFFICE

34677

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

620-B Mt. Vernon Oldsmar, Florida 95 JUL 18 AH 8: 22 SECRETARISSEE, FLURIDA SECRETARISSEE, FLURIDA

ARTICLE III SHARES

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

1,000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and address of the initial registered agent is:

Tim Castle
620-B Mt. Vernon
Oldsmar, Florida 34677

#### ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

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

Tim Castle 620-B Mt. Vernon Oldsmar, Florida 34677

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this \_13 \_\_ day of \_July\_ \_\_\_\_\_\_, **19**95\_\_\_\_\_. Signature

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

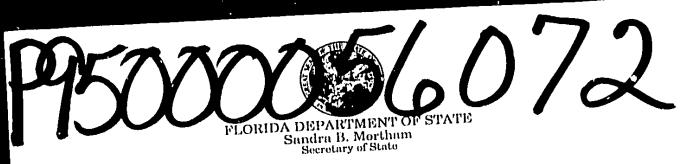
Signature

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

dil

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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:	Castle Automo	tive, Inc.	
			<del></del>	
2. The name and	address of the regi	stered agent and office i	is:	95 JUII SECRE
	Tim Cas	Stle (Name)		INSSECTION OF THE REAL PROPERTY OF THE REAL PROPERT
	620-B A	it. Vernon ox or Mail Drop Box <u>NOT</u> a	ACCEPTABLE)	H 8: 22 FLORI
	Oldsmar	, Florida 346 (Спу/Sтате/Zip)	77	P
corporation at the agent and agree to relating to the prop	place designated i act in this capaci	agent and to accept so in this certificate, I here ity. I further agree to co erformance of my duties red agent.	by accept the appoints omply with the provise	ment as registered
Line	(SIGNATUR	Е)	July 13, 199 (DATE)	95



July 25, 1997

CASTLE AUTOMOTIVE, INC. 111 PINE AVENUE **UNIT A** OLDSMAR, FL 34677

SUBJECT: CASTLE AUTOMOTIVE, INC.

Rof. Number: P95000056072

Debit Memo #: 80267-C

This is to inform you that check #1583 in the amount of \$165.00 submitted with the annual report for CASTLE AUTOMOTIVE, INC. has been returned by your bank because of NON-SUFFICIENT FUNDS.

We request you remit a cashier's check or money order, referencing the above named debit memo number, in the amount of \$180.00 made payable to the Department of State to cover the unpaid fees and service charge.

Section 607.1421 or 617.1421, Florida Statutes, requires at least 60 day notice of our intent to administratively dissolve or revoke your corporation for failure to file the annual report and pay the filing fee. Consider this your 60 day notice if the payment is not received, your corporation will be administratively dissolved or revoked on or after September 25, 1997 and a reinstatement fee of an additional \$585 will be imposed to reactivate the corporation.

Please send the replacement check to my attention at the address listed below.

If you have any questions concerning the filing of your document, please call (850) 487-6057.

Pat Bailey Accountant I Letter Number: 697A00037739

# P95000056072

300012302523--9 -09/24/97--01090--003 \*\*\*\*180.00 \*\*\*\*180.00

September 24, 1997

REPLACEMENT FEE 1997

ANNUAL REPORT: CASTLE AUTOMOTIVE, INC.

DEBIT MEMO: # 80267-C

CHECK #: 1583