

P9500005904/

TRANSMITTAL LETTER

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

SUBJECT: AL'S AUTO REPAIR, INC
(Proposed corporate name)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for
\$ 70.00.

FROM:

AL'S AUTO REPAIR, INC
Name (printed or typed)
5401 NW 102 AVE #109-110
Address
SUNRISE FL 33351
City, State, & Zip
305-741-6010
Telephone Number

00670
00611
00671

500001543505
-07/24/35--01004--005
*****70.00 *****70.00

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



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

July 24, 1995

ARTHUR BARBITTA
7923 NW 60TH STREET
TAMARAC, FL 33321

SUBJECT: AL'S AUTO REPAIR, INC.
Ref. Number: W95000014826

We have received your document for AL'S AUTO REPAIR, INC. and check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6878.

Terri Buckley
Corporate Specialist

Letter Number: 795A00035112

ARTICLES OF INCORPORATION
OF

AL'S AUTO REPAIR, INC

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:

AL'S AUTO REPAIR, INC.

ARTICLE II PRINCIPAL OFFICE

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

5401 NW 102 AVE #109-110
SUNRISE FL 33351

ARTICLE III SHARES

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

1000 @ \$1.00

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

ARTHUR BARBITTA
7923 NW 60th ST
TAMARAC FL 33321

ARTICLE V INCORPORATOR(S)

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

ARTHUR BARBITTA
723 NW 60th ST
TAMARAC FL 33321

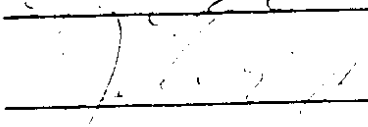
JOHN PIERCE JR.
6251 SW 9th CT
NORTH LAUDERDALE FL
33068

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

18th day of JULY, 1995.



Signature



Signature

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: AL'S AUTO REPAIR, INC.

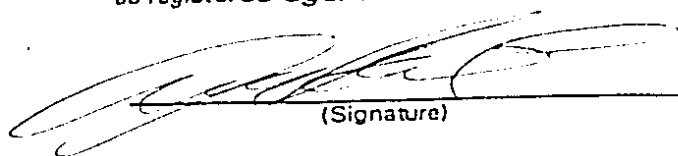
2. The name and address of the registered agent and office is:

ARTHUR BARBITTA
(Name)

7923 NW 60th ST
(P.O. Box not acceptable)

TAMARAC FL 33321
(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.


(Signature)

7/18/95

P95000059041

Scott M. Bender Esq.
Requestor's Name

7446 Royal Palm Blvd.
Address

Margate FL 33063
City/State/Zip Phone #

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. _____ (Corporation Name) (Document #)

2. _____ (Corporation Name) (Document #)

3. _____ (Corporation Name) (Document #)

4. _____ (Corporation Name) (Document #)

☐ Walk in

☐ Pick up time _____

☐ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of State

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

FILED
96 JUL -8 PM 1:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

OLD
Red
CRG 7/15

Examiner's Initials

Florida Department of State, Sandra B. Mortham, Secretary of State

OFFICER / DIRECTOR RESIGNATION

I, Mildred Barbitta, hereby resign as Treasurer (Title)

of Al's Auto Repair, Inc. (Name of Corporation)

a corporation organized under the laws of the State of Florida

That the corporation has been notified in writing of the resignation.

X Mildred Barbitta
(Signature of resigning officer/director)

FILED
96 JUL -8 PM 1:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILING FEE IS \$35.00

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

P950000 59041

Scott M. Bender
Requestor's Name

7446 Royal Palm Blvd
Address

Margate FL 33003
City/State/Zip Phone #

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. _____
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

900001887689
-07/09/96 - 01000-001
*****157.50 *****35.00

☐ Walk in
☐ Mail out

☐ Pick up time
☐ Will wait

☐ Photocopy

☐ Certified Copy

☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestic on
<input type="checkbox"/>	Other

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<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

FILED
96 JUL -8 PM 1:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

O/D Res

DFG

7/15

Examiner's Initials

Florida Department of State, Sandra B. Mortham, Secretary of State

OFFICER / DIRECTOR RESIGNATION

I, Arthur Barbitta, hereby resign as President
(Title)
of AI's Auto Repair, Inc.
(Name of Corporation)
a corporation organized under the laws of the State of Florida

That the corporation has been notified in writing of the resignation.


(Signature of resigning officer/director)

FILED
96 JUL - 8 PM 1:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILING FEE IS \$35.00

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

SCOTT M. BENDER, ESQ.
ATTORNEY AT LAW

46 ROYAL PALM BLVD.
MARGATE, FL 33063

TELEPHONE (954) 975-6868
TOLL FREE (800) LAW-3631
PAGER (954) 992-3407
FAX (954) 975-8121

P95000059041

July 2, 1996

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

4000001887604
-07/09/96--01080--021
*****87.50 *****87.50

Re: Name of Corporation: Al's Auto Repair, Inc.
Corporation Number : P 95000059041
My Clients : Arthur and Mildred Barbitta

Dear Sir/Madam:

Enclosed please find my clients' resignations as President and Treasurer, respectively, of the above named corporation. Also enclosed is Mr. Barbitta's resignation as registered agent.

My check in the amount of \$157.50 for processing is enclosed, consisting of two officer/director resignations @\$35 plus resignation of registered agent @87.50.

Thank you for your anticipated courtesy and cooperation.

Yours truly,



Scott M. Bender, Esq.
SMB/af

encl: as noted
cc: client

CERTIFIED MAIL RETURN RECEIPT REQUESTED # Z 134 155 914



P95000059041

Requestor's Name

Als Auto Repair Inc
5401 NW 102 Avenue
Bay 109/110
Sunrise FL 33351

City/State/Zip

Phone #

SEP 13 1996
-09/13/96--01034--016 L
*****35.00 *****35.00

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. _____
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

FILED
SEP 13 PM 3:05
TALLAHASSEE
STATE
FLORIDA

- ☐ Walk in ☐ Pick up time _____ ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

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<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

RA Chg.

VS SEP 19 1996

Florida Department of State, Sandra B. Mortham, Secretary of State

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of FLA submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation is: AL'S Auto Repair Inc.
2. The mailing address of the corporation is: 5401 N.W. 102 AVE Bg 109
SUNRISE, FLA. 33351
3. Date of incorporation/qualification: _____ Document number: _____
4. The name and address of the current registered agent and office:

ARTHUR BACBITA
5401 N.W. 102 AVE #109
SUNRISE, FLA. 33351

5. The name and address of the new registered agent and office: (P.O. Box Not Acceptable)

John PIERCE
5401 N.W. 102 AVE #109
SUNRISE, FLA. 33351

The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.

[Signature]
(Signature of an officer, chairman or vice chairman of the board)

9/10/96
(Date)

John E. PIERCE Jr., VICE Pres.
(Printed or typed name and title)

Having been named as registered agent *ar:* to accept service of process for the above stated corporation, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.

[Signature]
(Signature of Registered Agent)

9/8/96
(Date)

If signing on behalf of an entity:

John E. PIERCE Jr.
(Typed or Printed Name)

Pres.
(Capacity)

FILED
96 SEP 13 PM 3:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA