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(((H95000009270))) DOCUMENT TYPE: FLORIDA PROFIT CORPORATION OR P.A.

NAME: DRS. MOBILE CAR CARE, INC.

FAX AUDIT NUMBER: H95000009270 CURRENT STATUS: REQUESTED DATE REQUESTED: 08/22/1995

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SECRETARY OF STATE
TALL
SSEE, FLORID

OF CARE, MODILE CAR CARE, INC.

I the undersigned sole subscriber to these Articles of Incorporation, being a natural person competent to contract, hereby endeavor to establish a Florida corporation for profit.

ARTICLE I.

The name of this corporation shall be: DRS. MOBILE CAR CARE, INC.

ARTICLE II.

The corporation may engage in any or all lawful business permitted under the laws of the State of Florida.

ARTIGLE III,

The maximum authorized capital stock of this corporation shall be One thousand Shares (1,000) of common stock with a par value of One dollar (\$1.00) per share.

ARTICLE IV.

The street address of the corporation's initial registered office and principal place of business shall be 1750 Northwest 92nd Avenue, Pembroke Pines, Florida 33024. The name of the corporation's initial registered agent at this address shall be Robert J. Diaco. The principal place of business is 1750 Northwest \$2nd Avenue, Pembroke Pines, Florida 33024.

M. M°CLEARY MoCLEARY & CO., 100 Seef University Drive Plantation, R. 22224 205-472-1404

APPICIE Y.

This corporation shall be managed by the stockholders of the corporation rather than by a board of directors.

APPICIA VI.

The sole incorporator is Robert J. Diago of 1750 Northwest 92nd Avenue, Pembroke Pines, Florida 33024.

EXECUTION

Being the sole incorporator, I hereby execute these Articles of Incorporation.

Robert J. Diago

ACCOUNTEDGEMENT

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ACCEPTANCE OF DESIGNATION

Naving bean named to accept service of process for the above stated corporation as specified in ARTICLE IV., I hereby agree to act in this capacity.

Robert J. Flaco

State of Florida) County of Broward)

I hereby certify on this <u>21st</u> day of <u>Insert</u>, 1995, personally appeared before the undersigned authority, Robert J. Diaco to me well known and known to me to be the person who executed, acknowledged and accepted the designation in these Articles of Incorporation.

Witness my hand and seal in the County and State aforesaid on the above date.

Notary Public

My commission expires:

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