

# **CAPITAL CONNECTION, INC.**

417 E. Virginia St., Suite 1, Tallahassee, FL 32301, (904)224-8870  
 Mailing Address: Post Office Box 10349, Tallahassee, FL 32302  
 TOLL FREE No. 1-800-342-8062  
 FAX (904) 222-1222

NAME \_\_\_\_\_  
 FIRM \_\_\_\_\_  
 ADDRESS \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

PHONE ( ) \_\_\_\_\_

Service: Top Priority \_\_\_\_\_ Regular \_\_\_\_\_  
 One Day Service Two Day Service

To us via \_\_\_\_\_ Return via \_\_\_\_\_

Matter No.: \_\_\_\_\_ Express Mail No. \_\_\_\_\_

State Fee \$ \_\_\_\_\_ Our \$ \_\_\_\_\_

*DMC 12/18/96*

REQUEST	TAKEN	CONFIRMED	APPROVED
DATE _____	_____	_____	_____
TIME _____	_____	CK No. _____	_____
BY <i>ADP</i>	_____	_____	_____

WALK-IN Will Pick Up *12-18-112*

**P96000102092**  
 RE: Jupiter Tool Repair  
Inc

	C.C. FEE.	DISBURSED
<input checked="" type="checkbox"/> Capital Express™	_____	_____
<input type="checkbox"/> Art. of Inc. File	_____	_____
<input type="checkbox"/> Corp. Record Search	_____	_____
<input type="checkbox"/> Ltd. Partnership File	_____	_____
<input type="checkbox"/> Foreign Corp. File	_____	_____
<input type="checkbox"/> ( ) Cert. Copy(s)	_____	_____
<input type="checkbox"/> Art. of Amend. File	_____	_____
<input type="checkbox"/> Dissolution/Withdrawal	_____	_____
<input type="checkbox"/> C U S-	_____	_____
<input type="checkbox"/> Fictitious Name File	_____	_____
<input type="checkbox"/> Name Reservation	_____	_____
<input type="checkbox"/> Annual Report/Reinstatement	_____	_____
<input type="checkbox"/> Reg. Agent Service	_____	_____
<input type="checkbox"/> Document Filing	_____	_____
<input type="checkbox"/> Corporate Kit	_____	_____
<input type="checkbox"/> Vehicle Search	_____	_____
<input type="checkbox"/> Driving Record	_____	_____
<input type="checkbox"/> Document Retrieval	_____	_____
<input type="checkbox"/> UCC 1 or 3 File	_____	_____
<input type="checkbox"/> UCC 11 Search	_____	_____
<input type="checkbox"/> UCC 11 Retrieval	_____	_____
<input type="checkbox"/> File No.'s, _____ Copies	_____	_____
<input type="checkbox"/> Courier Service	_____	_____
<input type="checkbox"/> Shipping/Handling	_____	_____
<input type="checkbox"/> Phone ( ) _____	_____	_____
<input type="checkbox"/> Top Priority	_____	_____
<input type="checkbox"/> Express Mail Prep.	_____	_____
<input type="checkbox"/> FAX ( ) _____ pgs.	_____	_____

## **SUBTOTALS**

FEE.....	\$	_____
DISBURSED.....	\$	_____
SURCHARGE.....	\$	_____
TAX on corporate supplies.....	\$	_____
SUBTOTAL.....	\$	_____
PREPAID.....	\$	_____
BALANCE DUE.....	\$	_____
	\$	_____

Please remit invoice number with payment  
 TERMS: NET 10 DAYS FROM INVOICE DATE  
 1 1/2% per month on Past Due Amounts  
 Past 30 Days, 18% per Annum.

THANK YOU  
 from  
 Your Capital Connection

**ARTICLES OF INCORPORATION**

**JUPITER TOOL REPAIR, INC.**

**FILED**

96 DEC 18 PM 3:00

The undersigned, acting as Incorporator of <sup>STATE</sup> Florida corporation under the Florida Business Corporation Act, Chapter 607 of the Florida Statutes, hereby adopts the following Articles of Incorporation for such Corporation:

**ARTICLE I: NAME & ADDRESS**

The name of the Corporation is Jupiter Tool Repair, Inc., 215-B, Jupiter Street, Jupiter, Florida 33458.

**ARTICLE II: DURATION**

The Corporation shall have perpetual existence.

**ARTICLE III: PURPOSE**

Tool repair, supplier, distributor and sales of tools and mechanized components for automotive and construction industry.

**ARTICLE IV: CAPITAL STOCK**

The Corporation is authorized to issue 500 shares of One Dollar (\$1.00) par value Common Stock.

**ARTICLE V: INITIAL REGISTERED OFFICE AND AGENT**

The street address of the initial registered office of the Corporation is 1391 Stoneway Lane, West Palm Beach, Florida, 33417 (561) 697-1765 and the name of the Registered Agent for the Corporation at that address is Robert Wilde.

**ARTICLE VI: INITIAL BOARD OF DIRECTORS**

The Corporation will have 2 (two) directors initially to hold office until the first annual meeting of shareholders and their successors shall have been duly elected and qualified, or until their earlier resignation, removal from office or death. The number of the directors may be either increased or decreased from time to time in accordance with the bylaws of the Corporation. The names of the initial directors of the Corporation are: **President - Robert Wilde; Vice-President - Jill Murray** .

**ARTICLE VII: INCORPORATOR**

The name and address of the person signing these Articles is: **Kevin R. Anderson, Esquire, 224 Datura St., Ste. 815, West Palm Beach, Florida 33401.**

**ARTICLE VIII: AMENDMENTS**

The power to amend these Articles of Incorporation in accordance with the law is reserved to the shareholders. Any right conferred upon any shareholder by these Articles of Incorporation is subject to this reservation.

**IN WITNESS WHEREOF**, the undersigned incorporator has executed these Articles of Incorporation on this 6<sup>th</sup> day of DECEMBER, 1996.

  
KEVIN R. ANDERSON, Esquire

**ACCEPTANCE OF DESIGNATION AS REGISTERED AGENT**

I hereby accept the appointment as the initial Registered Agent of Jupiter Tool Repair, Inc., as made in the foregoing Articles of Incorporation.

DATE: 12-6-96

BY: Robert Wilde  
ROBERT WILDE

FILED  
DEC 18 PM 3:00  
STATE  
FLORIDA

STATE OF FLORIDA

COUNTY OF PALM BEACH

BEFORE ME, the undersigned authority, authorized to take acknowledgments in the State and County set forth above, personally appeared EVIN R. ANDERSON, known by me to be the person who executed the foregoing Articles of Incorporation, and he acknowledged before me that he executed these Articles of Incorporation.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal in the State and County aforesaid, this 6<sup>th</sup> day of December, 1996.



JOHN A KOVARIK  
My Commission CC317110  
Expires Sep. 20, 1997  
Bonded by HAI  
800-422-1555

John A. Kovarik  
NOTARY PUBLIC

MY COMMISSION EXPIRES: 9/20/97