

P960000 24714

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 \$ _____

RE: Cariduro

Body Shop

96 MAR 20 AM 11:35

SECRET (S) FOR STATE DISBURSED
TALLAHASSEE, FLORIDA

<input checked="" type="checkbox"/>	Capital Express™		
<input checked="" type="checkbox"/>	Art. of Inc. File		
<input type="checkbox"/>	Corp. Record Search		
<input type="checkbox"/>	Ltd. Partnership File		
<input checked="" type="checkbox"/>	Foreign Corp. File		
<input type="checkbox"/>	() Cert. Copy(s)		
<input type="checkbox"/>	Art. of Amend. File		
<input checked="" type="checkbox"/>	Dissolution/Withdrawal	G/S	
<input type="checkbox"/>	C U S-		
<input type="checkbox"/>	Fictitious Name File		
<input type="checkbox"/>	Name Reservation	9600001750689	
<input type="checkbox"/>	Annual Report/Reinstatement	03/20/96 01035-010	
<input type="checkbox"/>	Reg. Agent Service	***191.25 ***191.25	
<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 Prop.		
<input type="checkbox"/>	FAX () pgs.		
SUBTOTALS			

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

RECEIVED
96 MAR 20 AM 10:07
DIVISION OF CORPORATION

REQUEST TAKEN CONFIRMED APPROVED
DATE _____
TIME _____
BY _____

WALK-IN 3/20/96 12:00
Will Pick Up

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

FILED

ARTICLES OF INCORPORATION

96 MAR 20 AM 11:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

CARIDURO Paint & Body SHOP, INC.

ARTICLE II PRINCIPAL OFFICE

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

7230 Overland Rd.
ORLANDO, Florida 32810

ARTICLE III SHARES

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

100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Hector Rivera
509 Little Wekiva Rd.
Altamonte SPRINGS, Florida 32810

ARTICLE V INCORPORATOR(S)

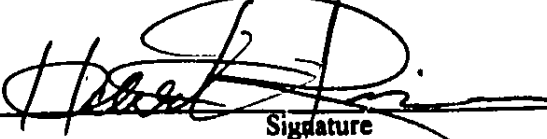
See instructions for officers/directors

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

HECTOR RIVERA
509 Little Wekiva Rd.
ALTAMONTE SPRINGS, Florida
32810

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

19 day of MARCH, 19 94.

 (President)
Signature

Signature

Signature

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

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

FILED

96 MAR 20 AM 11:35

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE
UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA,
FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED
OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is:

Cariduro Paint & Body Shop, Inc.

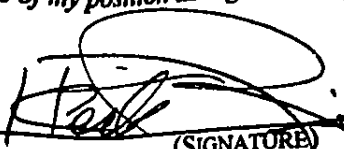
2. The name and address of the registered agent and office is:

HECTOR Rivera
(NAME)

509 Little Wekiva Rd.
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

Altamonte Springs, Florida 32810
(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)

3/19/96
(DATE)