160000029121 TRANSMITTAL LETTER

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

SUBJECT: FAMILY 1	JECT: FAMILY TIRE, TOWING & SERVICE CENTER, INC. (Proposed corporate name - must include suffix)			1 CMC0C01 7/15:1:2:5:1 -03/28/9601055020 *****78.75 *****78.75	
Enclosed is an original for: [\$70.00 Filing Fee	and one (1) cop 78,75 Filing Fore & Cordinato	oy of the erticles of in [] \$122.50 Filling Fee & Certified Copy	ncorporation ar [**] \$131.25 filling Fen, Cardfield Copy & Certificate	nd a check	
FROM:		Professional Ser a (printed or typed)	cvices of Fo	ort Myers, Inc.	
	13611 Mcg	regor Blvd Sui	ite#3	95 HAR F	
		City, State & Zip	<u> </u>	TILED 128 PH 2: Chieffor	
		1-4444 na Telephone number	<u></u>	NDA NDA	

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

1

ANTICLES OF INCORPORATION

QE

FILED

96 MAR 28 M 2-37

MAIE

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.

FAMILY TIRE, TOWING, & SERVICE CENTER, INC.

ARTICLET HAME

The name of the corporation shall be

FAMILY TIRE, TOWING, & SERVICE CENTER, INC.

ARTICLE II PRINCIPAL OFFICE

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

1006 PONDELLA ROAD FT. MYERS, FLORIDA 33903

ARTICLE III CAPITAL STOCK

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

1000

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

SOUTHWEST PROFESSIONAL SERVICES OF FT. MYERS, INC. 13611 MCGREGOR BLVD. SUITE #3 FT. MYERS, FLORIDA 33919

ARTICLE V INCORPORATOR(S)

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

Sugan Sarabela Tanner 1025 NE 13th Ave Cape Coral, Fl 33909

The undersigned has(have) e	MACOLOG ILIGAD MILIO	clos of incorporation this
25 day of	March	, 19 <u>96</u> ,
	Luin	Signature/Nite PRESIDENT
	· -	Signature/Nild PRESIDENT
		Signature/Title
		Signature/Title

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0601 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.

mmo of the corporation is: Family Tire, Towing & Service Center,	Inc.
ama and address of the registered agent and office is:	
Southwest Professional Services of Fort Myers, Inc.	
Will be	
(P.O. Box get acceptable)	
Fort Myers, Fl. 33919	
(City/State/Zip)	
	Southwest Professional Services of Fort Myers, Inc. (Hann) 13611 McGregor Blvd. Suite #3 (P.O. Box Hat acceptable) Fort Myers, F1. 33919

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 positio 1 as registered agent.

Southwest professional
Services of Fort Myers, Inc.

(Signature)

(Signature)