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6/06/96

FLORIDA DIVISION OF CORPORATIONS
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TO: DIVISION OF CORPORATIONS

FROM: FAS-T CORP. AGENTS, INC.

DEPARTMENT OF STATE

8405 NW 53RD ST

STATE OF FLORIDA

SUITE C-100

409 EAST GAINES STREET

MIAMI FL 33166--

FL 33418-0000

TALLAHASSEE, FL 32399

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DOCUMENT TYPE: FLORIDA PROFIT CORPORATION OR P.A.

NAME: CORAL GABLES MOBIL, INC.

FAX AUDIT NUMBER: H96000007956

CURRENT STATUS: REQUESTED

DATE REQUESTED: 06/06/1996

TIME REQUESTED: 12:06:58

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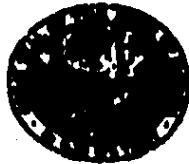
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08/08/08 18:12 Fl. Dept. of State pl /1



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

June 6, 1996

FAS-T CORP AGENTS, INC.

MIAMI, FL

SUBJECT: CORAL GABLES MOBIL, INC.
REF: W96000012096

We received your electronically transmitted document. However, the document has not been filed and needs the following corrections:

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Loria Poole
Corporate Specialist

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TALLAHASSEE, FLORIDA

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ARTICLES OF INCORPORATION

OF

CORAL GABLES MOBIL, 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:

CORAL GABLES MOBIL, INC.

ARTICLE II - PRINCIPAL OFFICE

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

390 Bird Road, Coral Gables, FL 33146

ARTICLE III - CAPITAL STOCK

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

Five hundred (500) shares

ARTICLE IV - INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

Rafael E. Ruiz
390 Bird Road, Coral Gables, FL 33146
Phone: (305) 445-3735

Prepared by:
Rafael E. Ruiz
390 Bird Road
Coral Gables, FL 33146
(305) 445-3735

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ARTICLE V - INCORPORATOR(S)

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

Rafael E. Ruiz
390 Bird Road
Coral Gables, FL 33146

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

_____ 31st day of _____ May _____, 19 96 _____.



Signature/Title
President

Signature/Title

Signature/Title

**CERTIFICATE OF DESIGNATION
REGISTERED AGENT \ REGISTERED OFFICE**

Pursuant to the provisions of section 607.0801, 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: _____
CORAL GABLES MOBIL. INC.

2. The name and address of the registered agent and office is:
Rafael E. Ruiz
390 Bird Road
Coral Gables, FL 33146

SIGNATURE Rafael E. Ruiz
TITLE President
DATE May 31, 1996

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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 OBLIGATION OF MY POSITION AS REGISTERED AGENT.

SIGNATURE Rafael E. Ruiz
DATE May 31, 1996