

P96000066654

TRANSMITTAL LETTER

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

SUBJECT: MOBILE PAINT MASTERS INC.  
(Proposed corporate name - must include suffix)

400001904344  
-07/25/96--01062--009  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

Enclosed is an original and one (1) copy of the articles of incorporation and a check for :

☐ \$70.00  
Filing Fee

☒ \$78.75  
Filing Fee  
& Certificate

☐ \$122.50  
Filing Fee  
& Certified Copy

☐ \$131.25  
Filing Fee,  
Certified Copy  
& Certificate

Additional Copy Required

SECRET  
DIVISION OF STATE  
TALLAHASSEE, FLORIDA

96 AUG -9 AM 9:02

FILED

FROM:

JONATHAN A. WARD

Name (printed or typed)

5619 DEWBERRY WAY

Address

WEST PALM BEACH, FL. 33415

City, State & Zip

407-697-9344 OR 561-309-5959

Daytime Telephone number

Bm  
8/12/96

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



**FLORIDA DEPARTMENT OF STATE**  
Sandra B. Mortham  
Secretary of State

July 29, 1996

JONATHAN A. WARD  
5619 DEWBERRY WAY  
WEST PALM BEACH, FL 33415

SUBJECT: MOBILE PAINT MASTERS INC.  
Ref. Number: W96000015739

We have received your document for MOBILE PAINT MASTERS INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6931.

Garrett Blanton  
Document Specialist

Letter Number: 396A00036189

## ARTICLES OF INCORPORATION

FILED

96 AUG -9 AM 9:03

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:

MOBILE PAINT MASTERS INC.

### ARTICLE II PRINCIPAL OFFICE

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

5619 DEWBERRY WAY  
WEST PALM BCH, FL. 33415

### ARTICLE III SHARES

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

~~1000~~ 5 (five) J.A.L.

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

JONATHAN A. WARD  
5619 DEWBERRY WAY  
WEST PALM BCH, FL 33415

J.A. Ward

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):

JONATHAN A. WARD (PRESIDENT)

5619 DEWBERRY WAY  
W. PALM BCH, FL 33415



DANAE J. WARD (VICE PRESIDENT)

5619 DEWBERRY WAY  
WEST PALM BCH, FL. 33415

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

20<sup>th</sup> day of JULY, 19 96.

(An additional article must be added if an effective date is requested.)

 PRES.  
Signature  
 V.P.  
Signature  
Signature

Notarization is not required

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 AUG -9 AM 9:03

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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.

1. The name of the corporation is: MOBILE PAINT MASTERS INC.

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

JONATHAN A. WARD

(NAME)

5619 DEWBERRY WAY

(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

WEST PALM BEACH, FL. 33415

(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)

7/20/96  
(DATE)