

SECRETARY OF STATE CORPORATION DIVISION STATE OF FLORIDA TALLAHASSEE, FLORIDA 32304

RE: HCC AUTO CENTER CAR CARE,INC. (Name of Corporation)

## **GENTLEMAN:**

Enclosed herewith are the ARTICLES of INCORPORATION together with a copy of said ARTICLES for HCC AUTO CENTER CAR CARE, INC.

( NAME OF CORFORATION )

And our check in the amount of \$ 70,00

FILING FEES \$ 35.00 CERTIFIED COPY

REGISTERED AGENT 35.00

TOTAL \$ 70,00

700001928357 -08/21/96--01054--007 \*\*\*\*\*70.00 \*\*\*\*\*\*70.00

# RESPECTFULLY SUBMITTED,

# **HECTOR F. CLAROS**

( Individual, s Name )

HCC AUTO CENTER CAR CARE, INC.
(Name of Corporation)

ECRETARY OF STAT

FILED

# DATE AUGUST 9, 1996

BUREAU OF CORPORATION RECORDS, P.O BOX 6327, TALLAHASSEE,FL.32314

# CERTIFICATE OF INCORPORATION



# HCC AUTO CENTER CAR CAREING.

We The Unersigned, hereby associate ourselves together for the purpose of becoming a corporation under the Laws of the Statutes of the State of Florida.

# ARTICLE

The Name of this corporation shall be:

#### HCC AUTO CENTER CAR CAREING.

### **ARTICLE II**

The corporation may engage in any activity or business permitted under the Laws of the United States and of the State of Florida.

#### ARTICLE III

The maximum number of shares of capital stock that this corporation is authorized to have outstanding at any one time is ONE THOUSAND (1000) SHARES OF COMMON STOCK, HAVING A PAR VALUE OF ONE (\$1.00) DOLLAR PER SHARE

#### ARTICLE IV

The amount of capital with which this corporation will begin business shall be the sum of not less than ONE THOUSAND (1000.00) DOLLARS.

#### ARTICLE V

This corporation shall exist perpetually unless sooner dissolved according to law.

# ARTICLE 1

The initial street address of the principal office of the corporation shall be.

# 491 MANGO AVE, UNIT G SARASOTA,FL.34237

# ARTICLE VII

The number of Directors of this corporation shall be at least one (1) and no more than five (5).

# ARTICLE VIII

The names and street addresses of the first Board of Directors of this Corporation are as follows.

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					Terry Terry						

# ARTICLE IX

The names and adress of the persons signing these Articles of Incorporation as subscriber is as follows.

HECTOR F. CLAROS	7721 34	TH CT EAST
	taria de la compania de la compania Compania de la compania de la compa	OTA.FL.34243
	 SANAS	V14,TL34243

## ARTICLE X

The corporation existence of this corporation shall begin on the date the Articles of Incorporatio are filed of record.

IN WITNESS WHEREOF, the undersigned, HECTOR F. CLAROS

ALL being natural persons, compent to contract, have hereto set their hands and seal or seals this

9 day of AUGUST.1996,

STATE OF FLORIDA

COUNTY OF Sames Fame

Befour Me, the undersigned NOTARY OF THE STATE OF FLORIDA personally appeared.

to me well know to me to be the individuals described in and who executed the foregoing ARTICLES of Incorporation, and they executed the same freely and voluntarily for the purpose therein expressed.

WITNESS my hand and OFFICIAL SEAL this quad day of August 19 96

OFFICIAL NOTARY SEAL MMISSION NUMBER CC438649 COMMISSION EXP.

C462-326-59-342-0 09-22-1998

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITTIN FLORIDA, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED.

ON COMPLIANCE WITH SECTION 607.325, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED:

FIRST THAT LICCAUTO CENTER CAR CENTERING.

( Name of Corporation )

WITH ITS PLACE OF BUSINESS AT <u>401 MANGO AVE, UNIT G.</u> SARASOTA, FL. 34237

AS NAME HECTOR E CLAROS

Name of Registered Agent

LOCATED AT 401 MANGO AVE, UNIT G. SARASOTA, FL. 34237

( street address and number of building )
 ( post office box are not acceptable, )

CITY OF **SARASOTA** STATE OF FLORIDA, AS ITS AGENT TO ACCEPT SERVICEOF PROCESS WITHIN FLORIDA.

SIGNATURE Signature (Corporation Officer)

TITLE

PRESIDENT

DATE AUGUST 9,1996

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THE CAPACITY, AND FURTHER AGREE TO COMPLY

WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT THE DUTIES AND OBLIGATIONS OF SECTION 607.325 FLORIDA STATUTES,

**SIGNATURE** 

REGISTERED AGENT)