

13
TRANSMITTAL LETTER
996000081225

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

9000001954039
-09/24/96--01014--019
*****78.75 *****78.75

SUBJECT: CARE FREE AUTO CENTER
(Proposed corporate name - must include suffix)

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

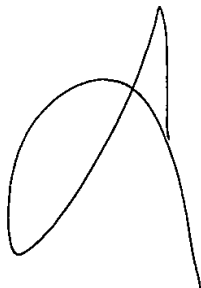

☐ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

Additional Copy Required

FROM: CARE FREE AUTO CENTER
Name (printed or typed)
7221 NW 16th ST. APT. C250
Address
SUNRISE, FL. 33313
City, State & Zip
954- 581- 9541
Daytime Telephone number

FILED
96 OCT -1 PM 3:27
SECRETARY OF STATE
TALLAHASSEE FLORIDA

~~996000081225~~
Suff: 365,524

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



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

September 24, 1996

CARE FREE AUTO CENTER
7221 N.W. 16TH ST.
APT. C250
SUNRISE, FL 33313

SUBJECT: CARE FREE AUTO CENTER
Ref. Number: W96000020062

We have received your document for CARE FREE AUTO CENTER and check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

PLEASE SIGN YOUR COPY IN SAME MANNER AS THE ORIGINAL.

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) 487-6934.

Loria Poole
Corporate Specialist

Letter Number: 896A00043880

ARTICLES OF INCORPORATION

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: CARE FREE AUTO CENTER INC.

ARTICLE II PRINCIPAL OFFICE

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

7221 NW 16th ST. APT C250
SUNRISE, FL. 33313

ARTICLE III SHARES

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

ONE HUNDRED (100) SHARES
VALUE ONE DOLLAR (\$1.00) A SHARE

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

JOSE L. RUIZ
7221 NW 16th ST. APT. C250
SUNRISE, FL. 33313

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TALLAHASSEE FLORIDA

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):

WILLIAM RUIZ PRESIDENT, TREASURER
18991 NW 22nd ST.
PEMBROKE PINES, FL. 33029

RAYMOND RUIZ SECRETARY
556 SW. 131 TER.
DAVIE FL. 33325

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

28 day of AUGUST, 19 96.

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

William Ruiz
Signature

Raymond Ruiz secretary
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**

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: CARE FREE AUTO CENTER INC.
2. The name and address of the registered agent and office is:

JOSE L. RUIZ
(NAME)

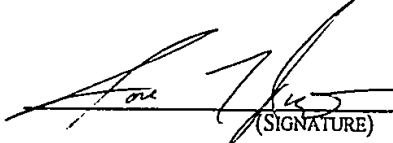
7221 NW 16th ST. APT. C250
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

SUNRISE, FL. 33313
(CITY/STATE/ZIP)

96 OCT -1 PM 3:27
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

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)

8-28-96
(DATE)