

**CORPORATE  
ACCESS,  
INC.**

1116-D Thomasville Road . Mount Vernon Square . Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (904) 222-2666 or (800) 969-1666 . Fax (904) 222-1666

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Articles

1.) PAB of Center Hill Inc.  
(CORPORATE NAME & DOCUMENT #)

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\*\*\*\*120.00 \*\*\*\*\*70.00

2.) \_\_\_\_\_  
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### Articles of Incorporation

We, the undersigned, as proper persons acting as incorporators of a corporation under the laws of the state of Florida, adopt the following articles of incorporation:

FIRST The name of the corporation is: PAB of Center Hill Inc.

SECOND The period of its duration is: Untill desolved.

THIRD The purpose of the corporation is: The sale of auto parts

FOURTH The aggregate number of authorized shares is: 1000.

FIFTH The corporation will not commence business until at least \$ 1.00 dollars have been received by it as consideration for the issuance of shares.

SIXTH Cumulative voting of shares of stock is not authorized.

SEVENTH Provisions limiting or denying to shareholders the pre-emptive right to acquire additional or treasury shares of the corporation are: None

EIGHTH Provisions for regulating the internal affairs of the corporation are: To be handled by the Board of Directors

NINTH The address of the initial registered office of the corporation is: 10835 C-469, Center Hill, FL., 33514 and the name of its initial registered agent at such address is: Patricia A. Bialas.

TENTH Address of the principal place of business is: 10835 C-469, Center Hill, FL. 33514.

ELEVENTH The number of directors constituting the initial board of directors of the corporation is 1, and the names and address of the persons who are to serve as directors until the first annual meeting of shareholders or until their successors are

elected and shall qualify are:

Name

Address

Patricia A. Bialas

10835 C-469

*Patricia A. Bialas*

TWELFTH The name and address of each incorporator is:

Name

Address

Patricia A. Bialas

10835 C-469

*Patricia A. Bialas*

Date December 5, 1996

**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:

PAB of Center Hill Inc.

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

Patricia A. Bialas  
(NAME)

10835 C-469

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

Center Hill, FL. 33574  
(CITY/STATE/ZIP)

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*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.*

Patricia A. Bialas  
(SIGNATURE)

12/5/96  
(DATE)

DIVISION OF CORPORATIONS, P. O. BOX 6327, TALLAHASSEE, FL 32314