76000 100 190 VECTION, INC.

· 417 E. Virginia St., Suite 1, Tallahassee, FL 32301, (904)224-8870 Mailing Address: Post Office Box 10349, Tallahassee, FL 32302 TOLL FREE No. 1-800-342-8062 FAX (904) 222-1222

FIRM ADDRE	SS
)
Service: Top Priority One Day S	Regular Two Day Service
To us via	Return via
Matter No.:	Express Mail No.
State Fee \$	Our \$

		• • • • • • • • • • • • • • • • • • •	
REQUE		CONFIRMED	APPROVED
DATE			
TIME	4-0	-	CK No
BY	11190		

WALK-IN WIII Pick Up/2-13 12 U

E:	AAA Tra	eina.	<u>~0.2</u>
	Center +	- Auto	Rose
	For	C.C. FEE.	DISBURSED
	_ Capital-Express ***		
<u></u>	Art. of Inc. File		- No. 1
	Corp. Record Search		
	Ltd. Partnership File		
	Foreign Corp. File		
_	(=) Cort . Copy(s)		
	Art, of Amend, File		
	Dissolution/Withdrawal		
	CUS		
	. Fictitious Name File		
	. ricilious Name File	OFFREI	155
	30000	/1 3/3501 04	7=-002
	Name Reservation ****	** *78.75 **	***78 <u>.75</u>
	Annual Report/Reinstatement		
	Reg. Agent Service		
	Document Filing		
		-	
	. Corporate Kit	\$5 Q	_
	Vehicle Search	E 3	-11
	. Driving Record	122 C	and the same of th
	Document Retrieval	33	- East
		- 1070 W	
	UCC 1 or 3 File	- 02- 4	5— 1 1
	UCC 11 Search	- hing =	- (3 -
	UCC 11 Retrieval		<u> </u>
	— File No.'s, — Coples	- 50	63
	Courier Service	- 22	<u>ര</u>
		<u>S</u> t.	
	Shipping/Handling	<u> </u>	
	Phone ()		
	Top Priority		N. 2.3
	Express Mail Prep.		
_	FAX () pgs.	-	
		3 10	
10	TALS	<u> </u>	
		: 10 50	
	FEE	3 - 17	
	***************************************	ત હ	
	DISBURSED	\$	
	Olimous and an		
	SURCHARGE	S = 177	
	TAV an area of		
	TAX on corporate supplies	jij to	
		76	
	SUBTOTAL	\$	
	PREPAID		
	· ····································	···· * <u> </u>	
	BALANCE DUE		
			1996
	I B. REGIS	TER DEC 1-3	1330
F	19880 femil invoice number with a	- Attended	
	TEHMS: NET TO DAYS FROM INVOICE	R DATE Y	HANK YOU
	1 1/2% Dor month on Past Due Ama	unte	from
	Past 30 Days, 18% per Annum.		apital Connection

THANK YOU from Your Capital Connection

11-2529-7 PORDER'S INC., THOMASVILLY, QA.

ARTICLES OF INCORPORATION OF

AAA Transmission Center & Auto Repair, 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:

AAA Transmission Center & Auto REPAIR, INC.

ARTICLE II PRINCIPAL OFFICE

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

6596 Taft Street Hollywood, FL 33024 (954) 962-5353

ARTICLE III CAPITAL STOCK

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

One Thousand Shares (1000.) at One Dollar (\$1.00) par value per share.

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Hanan Bouskila 6596 Taft Street Hollywood, FL 33024

ARTICLE V INCORPORATOR(S)

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

President/Director Hanan Bouskila 6596 Taft Street Hollywood, FL 33024

Vice-President/Director Miriam Elhiany 6596 Taft Street Hollywood, FL 33024

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this day of <u>December</u>, 19 <u>96</u>.

Signature

Signature

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0501, 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: AAA Transmission Center & Auto Repair, Inc.
2. The name and address of the registered agent and office is:
Hanan Bouskila
(NAME)
6596 Taft Street
(P.O. BOX NOT ACCEPTABLE)
Hollywood, FL 33024
(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 AND M.B.
DATE 12-12-96