DATION 13403 TRANSMITTAL LETTER

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

SUBJECT: TALLA	HASSEE CA	R CARE Z	「ルC」 「N 50000	20843954						
•	LIOposea corporam i	MIII - HIDZ HIDISCO CO.	-02/ ***	/11/9701153023 ***78.75 *****78.75						
			ON THE	97 77						
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 Additional Copy	\$131.25 Filing Fee, Certified Copy & Certificate Required	ind a check PH 1: 23						
FROM:										
TALLAHASSEE FL. 32304 City, State & Zip										
	36.X									
				J'						

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

ARTICLES OF INCORPORATION

ONESCRETEILED

97 FEB 1 1 PH 1: 29

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: TACCANASSEE CAR CARE INC

ARTICLE II PRINCIPAL OFFICE

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

165 NORMAN DR. TACCAHASSEE, FC. 32304

ARTICLE III SHARES

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

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is: DAVID M. LYONS
3209 CANGLEY CIR.

TAMANASSE FL 32312

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):

DAVID M. LYONS 3209 LANGLEY CIR. TALLAHASSEE, FL. 32312

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

// day of <u>FEB</u>, 19 <u>97</u>.

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

Signatur

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:	TALLAHASSEE	CAR	CARE	TV STEE	
2.	The name and address of the register	red agent and office is:			P	TO THE ST
	DAVID M.	LYONS (NAME)		 	H 1:29	W. Fris
	3209 LANG (P.O. Box	CEY CIK.	CEPTABLE)			
	TAUAHASSEE	(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.

Jail M Jacobs 2/11/97
(SIGNATURE) (DATE)