# P97000019537

T. Sewonish 11130 N.W. 38th St. Coral Springs Fl. 33065

			-		Office Use Only	
	CORPORATION 1	NAME	(S) & DOCUMENT NUM	BER(S), (if	known):	
	1. 7. S	S.S.	Auto Repair (Do	Corp.		
	2	oration N		cument #)	400000	
	3. <u>(Corp</u>	oration l	Name) (Do	cument #)	-02/24 *****	0951949 /9701030011 <del>70.00</del> *****70.00
	4(Corp	oration l	Name) (Do	ocument #)		<del></del>
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	NEW FILINGS		AMENDMENTS			FILED  97 MAR -5 PH 2: 06  SECRETARY OF STATE ALLAHASSEE, FLORIDA
X	Profit		Amendment			FILED  AR-5 PH 2: 0  ARASSEE, FLORIC
	NonProfit		Resignation of R.A., Officer/ Direct	ctor		
	Limited Liability		Change of Registered Agent			Est 5
	Domestication		Dissolution/Withdrawal			06 RIDA
	Other		Метдет			
	OTHER FILINGS' Annual Report		REGISTRATION/ QUALIFICATION	•	سللم استلما	- HATHER 1/27/97
	Fictitious Name		Foreign Limited Partnership	•	<b>4</b> 7 · ·	11.72
	Name Reservation		Reinstatement			HATTING !
			Trademark		The state of the s	/· - / - 1
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Examiner's Initials

CR2E031(1/95)



#### FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

February 27, 1997

THOMAS SEMONISH 11130 NW 38TH STREET CORAL SPRINGS, FL 33065

SUBJECT: T.S.S. AUTO REPAIR CORP.

Ref. Number: W97000004707

We have received your document for T.S.S. AUTO REPAIR CORP. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as registered agent for said corporation"); and the registered agent's signature.

The registered agent must sign accepting the designation.

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) 487-6923.

Letter Number: 797A00010379

Doris McDuffie Corporate Specialist Supervisor

### ARTICLES OF INCORPORATION

FILED

**OF** 

97 MAR -5 PH 2: 06

\* T.S.S. Auto Repair Corp.

SECRETARY OF STATE TALLAHASSEE, FLORIDA

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:

\* T.S.S. Auto Repair Corp.

#### ARTICLE II PRINCIPAL OFFICE

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

\* 500 South West Litt court POMPANO BEACK Florida 33660

#### 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:

THOMAS SemonISH
11130 world west 38th street
Coral Springs, Florida 33065

## ARTICLE V INCORPORATOR(S)

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

THOMAS. SemonISh
11130. N.W. 38 th st.
Coral Springs, F1.
33066

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

20th
day of Feb.
1997
Signature
Signature

Articles of Incorporation Filing Fee - \$35

# 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: T.S.S. Auto Repair Corp.						
	TALLES HAR						
2.	The name and address of the registered agent and office is:						
	THOMAS Semonish 電影						
	(NAME)						
	11130 N.W. 38th street						
(P.O. BOX NOT ACCEPTABLE)							
	Coral Springs FlA. 33065						
	(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	Deux	ancil
DATE 3	3 97	