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SEGALIANT OF STATE TALLAHASSEE, FLORIDA

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

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SUBJECT:	COVE ROA	D AUTO SALV				
	(Prop	osed corporate na	ame - must include sufi	fix)		
	an original a	nd one (1) cop r	y of the articles of	f incorporation a	and a check 1	
for : \$7	70.00	\$78.75	\$122.50	x \$131.25		
Filin	g Fee	Filing Fee & Certificate	Filing Fee & Certified Copy	Filing Fee, Certified Copy		
			Additional Copy	& Certificate V Required		
				·]	
	FROM:	PETER GRIJ				
		Name	printed or typed)			
		R.O. BOX 1				
			Address			
	PORT SALERNO, FLORIDA 34992					
		Cit	y, State & Zip		, 1,	
			283-9427			
		Dayume	Telephone number		1601 157	
		,			$\bigvee_{i=1,2,\ldots,n}$	
					1111	

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

ARTICLES OF INCORPORATION

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The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Article&BENETART UF STATE Incorporation.

ARTICLE: I NAME

The name of the corporation shall be:

COVE ROAD AUTO SALVAGE, INC..

ARTICLE II: PRINCIPAL OFFICE

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

4405 SE COVE ROAD

STUART, FLORIDA 34997

ARTICLE III: SHARES

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

100 SHARFS

ARTICLE IV: INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

KATHY FROST-PONTE 4125 SW MARTIN HIGHWAY PALM CITY, FLORIDA 34990

ARTICLE V: INCORPORATOR(S)

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

PETER GRIEN 4405 SE COVE ROAD STUART, FLORIDA 34997

ARTICLE VI: PURPOSE

The purpose of the corporation is:

AUTO SALVAGE

ARTICLE VII: VALUE AND CLASS OF STOCK

The par value and class of stock is: \$1.00 PER SHARE / COMMON STOCK

The undersign	ned incorportor(s) has (have) execute	ed these Articles of Incorporation thi
4	day of _ <i>MARC H</i>	, 19 <u>_<i>9</i> 7</u>
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	Signature	
	oighatai (
	Signature)

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

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PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA 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:

 COVE ROAD AUTO SALVAGE, INC.
- 2. The name and address of the registered agent and office is:

 KATHY FROST-PONTE

 4125 SW MARTIN HIGHWAY*

 PALM CITY, FLORIDA 34990

(P.O. box or Mail drop Box NOT Acceptable)

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

Date

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