000035796

TRANSMITTAL LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 (Proposed corporate name - must include suffix) Enclosed is an original and one (1) copy of the articles of incorporation and a check for: \$131.25 \$122.50 \$70.00 \$78.75 Filing Fee & Certified Copy Filing Fee, Filing Fee & Certificate Filing Fee Certified Copy & Certificate mmers FROM: Name (printed or typed) Shelly A. Summers gave West Falm Beach
Consent to type "Please
Process on check # 284 561- 795-0581

Daytimo Telephone number
7 + 5295

BR 4/20/97 189, 109, 106, 691 copy 29, 1925 3

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

BOMETER APR 2 2 1997

ARTICLES OF INCORPORATION

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:

ALLSTAR Towing, INC.

ARTICLE II PRINCIPAL OFFICE

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

8204 Pioneer Road West Palm Beach, 2l 33411

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Pamera C. Summers 8204 Pronzer Road West Palm Beach, 2233411

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorpora-

tion is(are):	Pamela C. 8204 Pione West Palm	Summers er Roal Beach, 21	L 334U	
	•		·	
	incorporator(s) has(have			rporation this
Pa	rela C. Sug	Signature		
	S	signature		

Articles of Incorporation Filing Fee - \$35

Signature

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 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 nam	e of the corporation is: \\ __	star lowing,	LNC.
2. The nam	e and address of the registered	agent and office is:	75 91 TO
	Pamela C	zmwerz	APR 22
	Na 8204 Flore		SEE, F.
	(P.O. Box 11st Palm Be	ot acceptable)	23 LORIGA
	(City/St	ate/Zip)	^
Having been above state the appoint to comply w mance of my as registered	n named as registered agent and corporation at the place designent as registered agent and agith the provisions of all statutes y duties, and I am familiar with a	d to accept service of pr nated in this certificate, ree to actin this capacit relating to the proper an nd accept the obligation	rocess for the I hereby accept ty. I further agree nd complete perfor- is of my position
Tamela	(Signature)	3/26)	197