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TO: DIVISION OF CORPORATIONS

FAX #: (904) 922-2001

FROM: EMPIRE CORPORATE KIT COMPANY  
CONTACT: RAY STORMONT  
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NAME: AUTO BODY'S BY BAIGORRIA, INC.,

AUDIT NUMBER.....H97000008673

DOC TYPE.....FLORIDA PROFIT CORPORATION OR P.A.

CERT. OF STATUS..0

PAGES..... 5

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TALLAHASSEE, FLORIDA

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**ARTICLES OF INCORPORATION  
OF  
AUTO BODY'S BY BAIGORRIA, INC.**

The undersigned hereby agree(s) to organize a corporation under the laws of the State of Florida, with the following Articles of Incorporation.

**ARTICLE I  
NAME**

The corporate name shall be:

**AUTO BODY'S BY BAIGORRIA, INC.**

**ARTICLE II  
EXISTENCE**

The corporation shall have perpetual existence.

**ARTICLE III  
PURPOSE**

The corporate purpose is to conduct all lawful business and it shall possess all powers now and hereafter conferred by the laws of the State of Florida and the United States upon corporations.

**ARTICLE IV  
AUTHORIZED CAPITAL STOCK**

The amount of capital stock authorized is five hundred (500) shares at one (1) dollar a share.

**ARTICLE V  
PRINCIPAL OFFICE**

Prepared By:  
Samuel A. Mones, Esq  
Florida Bar No. 325600  
407 Lincoln Road, Suite 2B  
Miami Beach, Florida 33139  
(305) 672-7772

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The post office address of the principal office of the corporation is: 15390 N.E. 6th Avenue, Apt 108, North Miami, Florida 33162 or at any other location that the Board of Directors chooses to designate.

**ARTICLE VI**  
**INITIAL REGISTERED AGENT**

The initial Registered Agent of the corporation is:

**SAMUEL A. MONES, ESQ.**

and the street address of the registered office is:

**407 Lincoln Road, Miami, Florida 33139**

**ARTICLE VII**  
**INITIAL BOARD OF DIRECTORS**

The business of the corporation shall be managed by a Board of Directors consisting of not fewer than one (1) person, the exact number to be determined from time to time in accordance with the by-laws. The name(s) and address(es) of the first Board of Directors who shall serve until the first annual meeting of the shareholders or until their successors are elected and qualified shall be:

**NAMES**

**ADDRESSES**

**JUAN ALBERTO BAIGORRIA**

**15390 N.E. 6th Avenue, Apt 108  
North Miami, Florida 33162**

**ARTICLE VIII**  
**POWERS OF DIRECTOR(S)**

The Director(s) shall exercise all powers conferred by law.

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**ARTICLE IX  
INDEMNIFICATION**

The corporation shall indemnify any and all of its directors or officers against losses and expenses actually and necessarily incurred by them in connection with the defense of any suit which they are parties to by reason of their acts while in their corporate capacity.

**ARTICLE X  
AMENDMENTS**

The corporation reserves the right to amend, alter, change or repeal any or all provisions of the Articles of Incorporation in the manner now or hereafter prescribed by Florida Statutes.

**ARTICLE XI  
INCORPORATOR**

The name(s) and address(es) of the Incorporator(s) of the corporation is/are as follows:

**NAMES**

**ADDRESSES**

**JUAN ALBERTO BAIGORRIA**

15390 N.E. 6th Avenue, Apt 108  
North Miami, Florida 33162

IN WITNESS WHEREOF, the undersigned, being the original Incorporator(s) of the corporation, has/have executed these Articles of Incorporation this 27 day of May, 1997.

  
**JUAN ALBERTO BAIGORRIA**  
Incorporator

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STATE OF FLORIDA) )ss:  
COUNTY OF DADE )

**BEFORE ME, the undersigned authority, personally appeared JUAN ALBERTO BAIGORRIA, to me well known and known to me to be the person described in and who executed the foregoing Articles of Incorporation, and he acknowledged before me that he executed the same for the purposes therein expressed.**

WITNESS my hand and official seal in the County and State  
aforementioned this 27 day of May, 1997.

*Donna J. Padusky*  
**NOTARY PUBLIC**  
 State of Florida  
 OFFICIAL NOTARY SEAL  
 DONNA J. PADUSKY  
 COMMISSION NUMBER  
 CC505944  
 MY COMMISSION EXP.  
 NOV. 13, 1999

**My Commission Expires:**

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## ACKNOWLEDGMENT

Having been named to accept service of process for the above stated corporation, at the place designated in these Articles of Incorporation, I hereby accept to act in this capacity, and agree to comply with the provisions in Chapter 48.091, Florida Statutes, relative to keeping open said office.

**SAMUEL MONES**  
**REGISTERED AGENT**

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