# P970000551605

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

Tallahassee, FL	32314					
SUBJECT:	Co	NSOLIDATED RE	PAIL INC.	clude suffix)	_	
			·	800002206 -06/09/97 *****70.00	-01134012	
Enclosed is an o	original	and one(1) copy of the artic	cles of incorporation an	d a check for :	_	
¥\$70. Filing F		□ \$78.75 Filing Fee & Certificate	□\$122.50 Filing Fee & Certified Cop	& Certificate		
				COPY REQUIRED		
FR	OM: _	OH'S N. SPROUSE  Name (Printed or typed)				
	_	6422 64th WAY				
Address  11 Dalm Reach FL 33409						
Daytime Telephone number					79 7 7	

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

To: JUN 1 1 1997

FILFA

97 JUN -9 PM 3: 47

## ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

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The name of the corporation shall be:

CONSOLIDATED REPAIR INC.

### ARTICLE II PRINCIPAL OFFICE

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

6422 64th WAY WEST PALM BEACH, FL 33409

# ARTICLE III SHARES

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

100 SHARES COMMON STOCK

#### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

OTT'S N. SPROUSE 6422 64th WAY WEST PAIM BEACLIFE 33409

#### ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

OTIS N. Sprouse 6422 64th WAY WET PALM BEACH, FL 33409

Gh. 71 Shows Signature/Incorporator

6-5-97

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

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 Oto VI Smoure 65-97

Signature/Registered Agent