Reconstruction Recons	
CORPORATION N	NAME(S) & DOCUMENT NUMBER(S), (if known):
2.	oration Name) (Document #)
3	31001122531836 -09/05/9701070012 pration Name) (Document #)
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Walk in Mail out	Pick up time 200 Certified Copy AGE 55 Will wait Photocopy Certificate of Status 55 AMENDMENTS
Profit	
NonProfit	Amendment Resignation of R.A., Officer/ Director Change of Registered Agent Director Proposition Of Withdrawal
Limited Liability	Change of Registered Agent
Domestication	Dissolution/Withdrawal
Other	Merger 9 5
CTHER FILINGS Annual Report Fictitious Name Name Reservation	Change of Registered Agent Dissolution/Withdrawal Merger REGISTRATION Foreign Limited Partnership Reinstatement Trademark Other
	Examiner's Initials

CR2E031(1/95)

ARTICLES OF INCORPORATION

97 AUG -5 PHO PER CONTROL OF THE CON

The undersigned incorporator(s), for the purpose of forming a corporation inder the Florida Business Corporation Act, hereby adopt(s) the following Articles of Florida Business Corporation Act, hereby adopt(s) the following Articles of Florida Business Corporation Act, hereby adopt(s) the following Articles of Florida Business Corporation Act, hereby adopt(s) the following Articles of Florida Business Corporation Act, hereby adopt(s) the following Articles of Florida Business Corporation Act, hereby adopt(s) the following Articles of Florida Business Corporation Act, hereby adopt(s) the following Articles of Florida Business Corporation Act, hereby adopt(s) the following Articles of Florida Business Corporation Act, hereby adopt(s) the following Articles of Florida Business Corporation Act, hereby adopt(s) the following Articles of Florida Business Corporation Act, hereby adopt(s) the following Articles of Florida Business Corporation Act, hereby adopt(s) the following Articles of Florida Business Corporation Act, hereby adopt(s) the following Articles of Florida Business Corporation Act, hereby adopt(s) the following Articles of Florida Business Corporation Act, hereby adopt(s) the following Articles of Florida Business Corporation Act (s) the following Articles of Florida Business Corporation Act (s) the following Articles of Florida Business Corporation Act (s) the following Articles of Florida Business Corporation Act (s) the following Articles of Florida Business Corporation Act (s) the following Articles of Florida Business Corporation Act (s) the following Articles of Florida Business Corporation Act (s) the following Articles Corporation Act (s) the following Articl

ARTICLE | NAME

The name of the corporation shall be:

EXPRESS AUTO SALE CORP.

ARTICLE II PRINCIPAL OFFICE

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

1244 W. 44 pl. HALEAH; FL. 33012

ARTICLE III SHARES

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

100 SHARES

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

NELLY SUAREZ 1244 W. 44 pl.

HIALEAH, FL. 33012.

ARTICLE V INCORPORATOR(S)

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

PLAND V. ARICEA 1344 W. 44 pl.
WELLY SUARER HEALT, Fl. 33012 Newy SUARER

ARTICLE VI DIRECTOR(S)

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

ALAND V. ALICEA 1244 W. 44 pl. Newy SUARES. HiALEAH, Fl. 33012

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this 444 day of 990st, 1992.

Signature

Signature

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.

The name of the co	orporation is:	EXPRESS	s Auto	SALE COR
The name and add	ress of the regi	stered agent an	d office is:	
Deru	SUALEZ			
	(NA	AME)		
1244	w. 44	19		
•	(P.O. BOX <u>NO</u>	<u>T</u> ACCEPTABLE	E)	
HIALE	AH. FL.	33012		•
) (CITY/S	TATE/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.

DATE 8 / 4 9 SEE FLORIDA

REGISTERED AGENT FILING FEE: \$35.00