

P97000107462

TRANSMITTAL LETTER

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

200002378822--5  
-12/22/97--01041--012  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT: ALL CAR COLLISION, INC.  
(Proposed corporate name - must include suffix)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

☐ \$70.00  
Filing Fee

☒ \$78.75  
Filing Fee  
& Certificate

☐ \$122.50  
Filing Fee  
& Certified Copy

☐ \$131.25  
Filing Fee,  
Certified Copy  
& Certificate

ADDITIONAL COPY REQUIRED

FILED  
97 DEC 22 PM 12:15  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FROM: SHIMON KAPETA  
Name (Printed or typed)

16710 NE 9TH AVE SUITE 509  
Address

NORTH MIAMI BEACH, FLORIDA 33162  
City, State & Zip

305-999-9936 305-798-1621  
Daytime Telephone number

Shimon Kapeta GAVE

AUTHORIZATION BY PHONE TO

CORRECT Incorporator / officer

DATE 12/23/97 NOTE: Please provide the original and one copy of the articles.

DOJ & CAM. nu

nu 12/23/97

FILED

97 DEC 22 PM 12:15

## 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.

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

### ARTICLE I NAME

The name of the corporation shall be: ALL CAR COLLISION, INC.

### ARTICLE II PRINCIPAL OFFICE

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

16710 NE 9TH AVE, SUITE 509  
NORTH MIAMI BEACH, FL. 33162

### 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 Florida street address of the initial registered agent are:

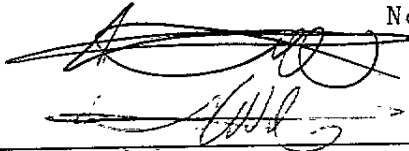
SHIMON KAPETA  
16710 NE 9TH AVE, # 509  
NORTH MIAMI BEACH, FL. 33162

### ARTICLE V INCORPORATOR

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

President

Shimon Kapeta  
16710 NE 9th Ave., Suite 509  
North Miami Beach, Fl. 33162



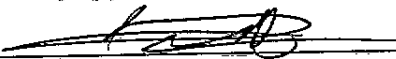
Signature/Incorporator

12/16/97

Date

(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



Signature/Registered Agent

12/16/97

Date