

P98000049412

TRANSMITTAL LETTER

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

700002542507--8
-06/01/98-01089-004
*****70.00 *****70.00

SUBJECT: B+S Elite Towing, 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

FROM: SHANNON ROONEY
Name (Printed or typed)

7949 36th Ave N
Address

St. Petersburg, FL 33710
City, State & Zip

813-345-2193
Daytime Telephone number

FILED
JUN - 1 AM 9:16
TALLAHASSEE, FLORIDA

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

CS
6-3-98

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.

ARTICLE I NAME

The name of the corporation shall be:

B & S Elite Towing, Inc.

ARTICLE II PRINCIPAL OFFICE

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

4501 NW 6th Street
Gainesville, FL. 32609

ARTICLE III SHARES

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

One Thousand Shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

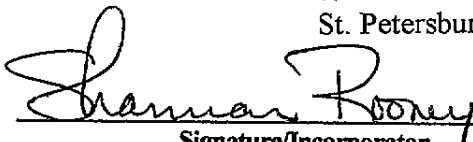
The name and Florida street address of the initial registered agent are:

Shannon Rooney
7949 36th Ave. N
St. Petersburg, FL 33710

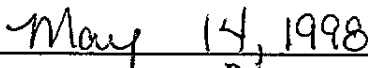
ARTICLE V INCORPORATOR

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

Shannon Rooney
7949 36th Ave. N
St. Petersburg, FL 33710



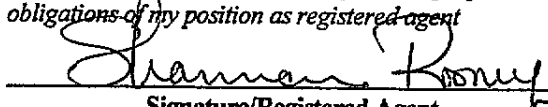
Signature/Incorporator



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



Date

FILED
98 JUN -1 AM 9:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA