

P98000058741
TRANSMITTAL LETTER

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

SUBJECT: Automotive Business Development Center INC.

(Proposed corporate name - must include suffix)

300002576533--7

-06/30/98--01080--002
*****78.00 *****78.00

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

☐ \$70.00
Filing Fee

☒ \$78.00
Filing Fee
& Certificate

☐ \$122.50
Filing Fee
& Certificate

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

FROM:

Joseph Medina

Name (Printed or Typed)

7201 Tropicana St

Address

Miramar FL 33023

City, State & Zip

(954) 964 2624

Daytime Telephone Number

SECRETARY OF STATE
TALLAHASSEE FLORIDA

98 JUN 30 PM 3:31

FILED

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

JUL 1 1998

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: Automotive Business Development Center INC.

ARTICLE II PRINCIPLE OFFICE

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

7201 Tropicana St.
Miramar, FL 33023

ARTICLE III SHARES

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

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

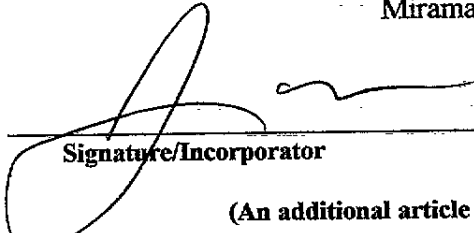
The name and Florida address of the initial registered agent are:

Joseph Medina
7201 Tropicana St.
Miramar, FL 33023

ARTICLE V INCORPORATOR

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

Joseph Medina
7201 Tropicana St.
Miramar, FL 33023



Signature/Incorporator

06/26/98

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 duty and I am familiar with and accept the obligations of my position as registered agent.



Signature/Registered Agent

06/26/98

Date

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SECRETARY OF STATE
TALLAHASSEE FLORIDA