

P98-000077347

N.M.B AUTO TITLE INC.  
754 N.E 167 ST.  
N.M.B. FLA 33162

City/State/Zip

Phone #

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

- 1. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)
- 2. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)
- 3. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)
- 4. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)

98 SEP 4 AM 8:54  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

FILED

- Walk in
- Mail out
- Pick up time \_\_\_\_\_
- Will wait
- Certified Copy
- Photocopy
- Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

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-08/24/98--01127--004  
\*\*\*\*122.50 \*\*\*\*122.50

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

*Handwritten:* 98-191666  
266-11

F. CHESSEY SEP 8 1998

Examiner's Initials



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State

August 27, 1998

RON LUKCHINSKIEET  
754 NE 167 STREET  
N MIAMI BEACH, FL 33162

SUBJECT: NMB AUTO TITLE, INC.  
Ref. Number: W98000019666

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TALLAHASSEE FLORIDA

We have received your document for NMB AUTO TITLE, INC. and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6904.

Freida Chesser  
Corporate Specialist

Letter Number: 998A00044428

ARTICLES OF INCORPORATION

OF

NMB AUTO TITLE, INC.

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TALLAHASSEE FLORIDA

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

I. NAME: The name of the Corporation shall be:

NMB AUTO TITLE, INC.

II. PRINCIPAL OFFICE: The principal place of business and mailing address of this corporation shall be:

754 N E 167th Street  
North Miami Beach, FL 33162

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

5000 Shares \$1.00 Par Value

IV. INITIAL REGISTERED AGENT AND STREET ADDRESS:  
The name and address of the initial registered agent is:

Ron Lukchinski  
754 N E 167th Street  
North Miami Beach, FL 33162

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

Ron Lukchinski	Charles Laloum
754 N E 1167th Street	754 N E 167th Street
North Miami Beach, FL 33162	North Miami Beach, FL 33162

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this 21 day of Aug, 1998.

  
\_\_\_\_\_  
Signature

  
\_\_\_\_\_  
Signature

CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, 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.

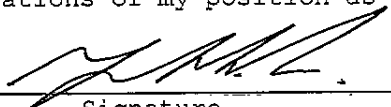
1. The name of the corporation is:

NMB AUTO TITLE, INC.

2. The name and address of the registered agent and office is:

RON LUKCHINSKI  
754 N E 167th Street  
North Miami Beach, FL 33162

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

08/31/98  
\_\_\_\_\_  
Date

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

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