Ma	n — 11	W31	2111
OFRIELDE ON (1 cumer #)		17/	246
I ZARUS CORPORATE FILING SERV	VICE, INC.		
(Requestor's Name) 3320 S.W. 87th AVENUE			
(Address)			
MIAMI, FLORIDA (305)552-59		800 <u>00</u>	27/9801036025
(City, State, Zip) (Phone  LOCAL REPRESENTATIVE TALLAHAS		<b>米</b> 海河	**78.75 *****78.75
LOCAL REFRESENTATIVE TALLAHAS	ODEE	OFFICE USE ONLY	
CORPORATION NAME(S) & DO	CUMENT NUM	RER(S) (if known):	<del></del> ;
1850: and Pa			10/0
1. MOPICA (Corporation Name)	AKING	SERVICES	11VC-
2.		(Document #)	
(Corporation Name)		(Document #)	· · · · · · · · · · · · · · · · · · ·
(Corporation Name)		(Document #)	<del></del>
4.		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	ECR.
(Corporation Name)		(Document #)	ASA 2
Walk in Pick up time	2-00	Certified Copy	SEE O
Mail out Will wait	Di-t		
Man out Win wait	Photocopy	Certificate of Status	RIGIE 5
			<b>&gt;</b>
NEW FILINGS	AMENDMI	ENTS	•
Profit	Amendment		
NonProfit	Resignation of R	I.A., Officer/Director	
. Limited Liability	Change of Regist	ered Agent	
Domestication	Dissolution/Withd	irawal /	1
Other	Merger	- AR	
			V
OTHER FILINGS	REGISTRATIO		
Annual Report	QUALIFICATIO	<u> </u>	
Fictitious Name 1770 1781	Foreign	<del>/</del>	
Name Reservation —		ap	
-98 OCT 27 AI! 10: 55	Reinstatement		
GECEIVED	Trademark		
	Other	Examine	r's Initials

## ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

TROPICAL PARKING SERVICES \_ 7

98 OCT 27 ANII: 15
SECRETARY BY STATL
TALLAHASSES FLORIDA

ARTICLE II PRINCIPAL OFFICE

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

9369 FONTAINEBLEAU BLUD APT. IT 109 MIAMI FC -33 172

## ARTICLE III SHARES

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

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Eystavo DiAZ 8196 S.ω. 158 1 PL Miami FF 33/93

## ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):  WILLIBARDO ACEUEDO  ALEXANDER ACRUEDO  9369 FONTAINEBLEAU BLUD APT. IT109  MIAMI FL 33172
ARTICLE VI DIRECTOR(S)
The name(s) and street address(es) of the director(s) to these Articles of Incorporation is(are):  (P) A/EXAN DER: ACEVEDO  (P) WILL BARPO ACEVEDO  9369 FONTAINEBLEAU BLVD APT JJ09  MIAMI, FL 33172
The undersigned incorporator(s) has(have) executed these Articles of Incorporation this $\underline{10}$ day of $\underline{26}$ , $\underline{1998}$ .
Signature

Articles of Incorporation Filing Fee - \$35

Signature,

Signature

## 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.

ne name ai	nd address o	n me regis	siereu a	uent ar				
	671	USTAVO	Dia	Z		e is:		
8/90	SW	(NA	ME)	PL				
<u> </u>	(P.O.	BOX NOT	ACCE	TABLE	<u>;)</u>	420	· · · · · · · · · · · · · · · · · · ·	—
	Mian	BOX <u>NOT</u>	ACCE	PLABLE	) 331	193.		
	8/90	8/90 SW (P.O.	8/90 SW 150 (P.O. BOX NOT	Miami G	8/90 SW 158th FL	8/90 SW 158 <sup>th</sup> FL (P.O. BOX <u>NOT ACCEPTABLE</u> ) Mamil 331	8/90 SW 158 Th FL  (P.O. BOX NOT ACCEPTABLE)  Miami 33/93.	8/90 SW 158 <sup>th</sup> FL (P.O. BOX <u>NOT ACCEPTABLE</u> ) Mamil 33193.

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 LEGISTERED AGENT.

SIGNATURE #

DATE

REGISTERED AGENT FILING FEE: \$35,00