

P980000 99423

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
98 NOV 23 AM 10:00

SUBJECT: ENDEE'S AUTO SERVICE 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 of Status

\$78.75 Filing Fee & Certified Copy
 \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED

FROM: KEVIN W. ENDEE
Name (Printed or typed)

PO Box 27115
Address

EL JOBEAN, FL 33927
City, State & Zip

941-766-1650
Daytime Telephone number

500002693885-7
-11/23/98--01099--012
*****78.75 *****78.75

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

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: ENDEE'S AUTO SERVICE INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:
4352 D EL TOBEAN ROAD
PORT CHARLOTTE, FL 33953

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:
(1,000) ONE THOUSAND

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:
KEVIN W. ENDEE
4352 EL TOBEAN RD., PORT CHARLOTTE, FL 33953

ARTICLE V INCORPORATOR

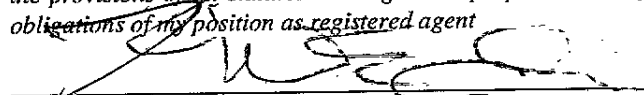
The name and address of the incorporator to these Articles of Incorporation are:
KEVIN W. ENDEE
4352 EL TOBEAN RD.
PORT CHARLOTTE, FL. 33953


Signature/Incorporator

11/17/98
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 duties, and I am familiar with and accept the obligations of my position as registered agent


Signature/Registered Agent

11/17/98
Date

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