(Requestor's Name) 3320 S.W. 87th AVENUE (Address) MIAMI, FLORIDA (305)552-5973 (City, State, Zip) (Phone #) LOCAL REPRESENTATIVE TALLAHASSEE OFFICE USE ONLY CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known): (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Certified Copy ⊬ Walk in Pick up time Will wait Certificate of Status Mail out Photocopy AMENDMENTS NEW FILINGS **Profit** Amendment Resignation of R.A., Officer/Director NonProfit Change of Registered Agent **Limited Liability** Dissolution/Withdrawal Domestication Merger Other OTHER FILINGS REGISTRATION/ QUALIFICATION Annual Report Foreign Fictitious Name Limited Partnership Name Reservation Reinstatement Trademark Other

Examiner's Initials

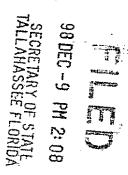
## ARTICLES OF INCORPORATION

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:

Flamingo motors, Inc.



#### ARTICLE II PRINCIPAL OFFICE

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

2260 NW 36st MAMI, FLA 33142

#### ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: One hundred Shares @ 1.00

## ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Jose m Villa longa 1700 NW North River DR. #907 MIAM: FLA 33125

# ARTICLE V INCORPORATOR(S)

Articles of Incorporation Filing Fee - \$35

# 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.

	The name of the corporation is: Flancingo Motors, INC
_	
٦	the name and address of the registered agent and office is:
	ZOSE Le. VIIIAlongA
-	(NAME)
	1700 NW N. River Dr # 907
	(P.O. BOX <u>NOT</u> ACCEPTABLE)
	UIAUI, FL. 33125
_	(CITY/STATE/ZIP)

IMAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF FPOCESS 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 SIGNAT

**REGISTERED AGENT FILING FEE: \$35.00**