79900000322

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

SUBJECT: _	T: John's & son Auto Repair, INC.					
	(Proposed corpo	rate name - must include su	ffix)			
			000027292582 -01/04/9901067020 ******70.00 ******70.00			
Enclosed is an or	riginal and one(1) copy of the article	es of incorporation and a	check for:			
2 \$70.0 Filing Fe		\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED			
FRC						
	Pall fl City,	1 Rd Address 32364 State & Zip	FILED 99 JAN -4 PH 2: 00 SECRETARY OF STATE ALLAHASSEE, FLORIDA			

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

Daytime Telephone number

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.

Λ	DT	ICLE	T	NAME
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The name of the corporation shall be:

JOHN'S & SON Auto Relair, INC.

ARTICLE II PRINCIPAL OFFICE

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

1332 Lake bradford Rd Tall Fl 32304

ARTICLE III SHARES

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

(Two Hundred (200))

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

JOHN A SAYAH
1717 Talpe & Rd Tall F1 32303

ARTICLE V INCORPORATOR

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

JOHN A SAYAH 1717 Taipes Rd Tail Fl 32303

Signature/Incorporator

Jan-4-99

Data

(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

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Sch A. Soyah

Date

Signature/Registered Agent

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