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

SECRETARY OF STATIONS
DIVISION OF CORPORATIONS
99 JAN 25 AM 7: 28

	`			TIONS 28
SUBJECT:	Proposed corpora	te name - must include suf	fix)	<u> </u>
	i in the second	CU		5 608
Enclosed is an origi	nal and one(1) copy of the articles	of incorporation and a	-01/25/990 ****122.50 check for:	********78.75
		1	□ \$131.25]
\$70.00 Filing Fee	\$78.75 Filing Fee	Filing Fee	Filing Fee,	
	& Certificate	& Certified Copy	Certified Copy & Certificate	
		ADDITIONAL CO	PY REQUIRED	
FROM:	Gal Schwa			
	3433 Missi	on Bay B	<u>lvd.</u> #32	1
_	Orlando, Fl City, State	32817 & Zip	<u> </u>	
_	Daytime Teleph	one number	· 	



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:

CAR WHIZ, INC.

PRINCIPAL OFFICE ARTICLE II

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

6470 Highway 17-92 Fern Park, F1 32730

ARTICLE III SHARES

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

100 at \$ 1.00 each

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

Gal schwartz 3433 Mission Bay Blvd# 321 Orlando, Fl 32817

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

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

Gal Schwartz 3433 Mission Bay Blvol #321 Orlando, Fl 32817

F.

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

20th day of <u>January</u>, 19<u>99</u>.

(An additional article must be added if an effective date is requested.)

Signature

Signature

Notarization is not required

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

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:
JAN 25
2. The name and address of the registered agent and office is:
Gal Schwartz :
3433 Mission Boy Blyd #32 (P.O. Box of Mail Drop Box NOT ACCEPTABLE)
Orlando, Fl 32817 (CITY/STATE/ZIP)
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) (DATE)