

P99000018793
TRANSMITTAL LETTER

Original

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

SUBJECT: _____ MIKE'S MOBILE AUTO SERVICE, INC. _____

(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of articles of incorporation and a check for:

X 70.00

78.75

122.50

131.25

900002787099--8

-02/25/99--01049--009

*****70.00 *****70.00

FROM: _____ MICHAEL J. VAN OCHTEN _____
Name (printed or typed)

_____ 131 MARYLAND AVENUE _____
Address

_____ PALM HARBOR, FL 34683-3418 _____
City, State & Zip

_____ (727) 785-3763 _____
Daytime Telephone number

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

FILED
99 FEB 25 PM 3:10
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

2/26

ARTICLES OF INCORPORATION
OF

MIKE'S MOBILE AUTO SERVICE, INC.

The undersigned incorporation (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:

MIKE'S MOBILE AUTO SERVICE, INC.

ARTICLE II PRINCIPAL OFFICE

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

675 ALTERNATE 19
PALM HARBOR, FL 34683

ARTICLE III CAPITAL STOCK

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

500 SHARES NON-PAR

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

JAMES H. COLLIER SR.
4344 SANDDOLLAR COURT
NEW PORT RICHEY, FL 34652

DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

99 FEB 25 PM 3:10

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ARTICLE V INCORPORATOR(S)

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

MICHAEL J. VAN OCHTEN (PRESIDENT)
675 ALT 19
PALM HARBOR, FL 34683

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

22ND ___ DAY ___ OF FEBRUARY ___ 1999

 P ___ Signature/Title

____ Signature/Title

____ Signature/Title

____ Signature/Title

____ Signature/Title

CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER 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: _

MIKE'S MOBILE AUTO SERVICE, INC.

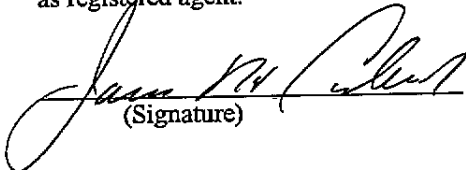
The name and address of the registered agent and office is:

JAMES H. COLLIER SR.
(Name)

4344 SANDDOLLAR COURT
(P. O. Box not acceptable)

NEW PORT RICHEY, FL 34652
(City/State/Zip)

I have been named as registered agent and to accept service of process for the aboved 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)

2-22-99
(Date)

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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