

P99000027701

TRANSMITTAL LETTER

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

500002813335--8
-03/22/99--01091--010
*****70.00 *****70.00

SUBJECT: SUNCOAST MOBILE AUTO REPAIR INC.

Proposed Corporate Name

Enclosed is an original and one copy of the Articles of Incorporation, a designation of registered agent, and a check for \$70.00. Please return one copy of the Articles stamped with the filing date.

FROM:

ROBERT D. PARTELO

Name (print or type)

12001 49TH STREET N # 208

Address

CLEARWATER, FL 33762

City, State, Zip

727-804-6971

Area Code and Phone Number (Daytime)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
99 MAR 22 PM 3:36

ARTICLES OF INCORPORATION

99 MAR 22 PM 3:36

SUNCOAST MOBILE AUTO REPAIR INC

(Name of Corporation)

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE 1: NAME

The name of the corporation shall be: SUNCOAST MOBILE AUTO REPAIR INC

ARTICLE 2: PRINCIPAL PLACE OF BUSINESS

The principal place of business of this corporation shall be (give street address and zip code): 12001 49TH STREET N # 208, CLEARWATER, FL 33762

ARTICLE 3: SHARES

All stock issued by this Corporation shall be common voting stock of a single class. The number of shares of stock that this corporation is authorized to have outstanding at any time is: 500

ARTICLE 4: INITIAL REGISTERED AGENT AND REGISTERED OFFICE

The name of the initial registered agent is ROBERT D. PARTELO

whose registered office is located at the place of business stated in Article 2 above.

ARTICLE 5: INCORPORATOR

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

ROBERT D. PARTELO
12001 49TH STREET N # 208
CLEARWATER, FL 33762

The undersigned incorporator has executed these Articles of Incorporation this 19TH Day of MARCH, 1999.



Signature

Articles of Incorporation
Filing Fee — \$35.00

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

Pursuant to Florida law, 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/professional association is: _____
SUNCOAST MOBILE AUTO REPAIR INC.

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

ROBERT D. PARTELO
Full name

12001 49TH STREET N # 208
Address (P.O. Box *not* acceptable)

CLEARWATER, FL 33762
City, State, and 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 OF REGISTERED AGENT

MARCH 19TH, 1999
DATE

Designation of Registered Agent
Filing Fee — \$35.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
99 MAR 22 PM 3:36