

TRANSMITTAL LETTER

P990000 43/09

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

SUBJECT:

TUNE UP MASTERS INC.

(Proposed corporate name - must include suffix)

900002869829--9
-05/10/99--01128--002
*****87.50 *****87.50

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

☐ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

☒ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM:

MOAIED A. NATOUR

Name (Printed or typed)

5240 NW 15 ST MARGATE

Address

MARGATE FL 33063

City, State & Zip

954-977 4958

Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

99 MAY 10 AM 11:29

FILED

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

T. SMITH MAY 12 1999

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.

ARTICLE I NAME

The name of the corporation shall be:

TUNE UP MASTERS INC

ARTICLE II PRINCIPAL OFFICE

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

5240 NW 15 ST MARGATE FL
33063.

ARTICLE III SHARES

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

1

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

MOAIED A. NATOUR
4711 NW 22 ST COCONUT CREEK FL 33066-

ARTICLE V INCORPORATOR

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

MOAIED A. NATOUR
4711 NW 22 ST COCONUT CREEK
FL 33066

~~MOAIED A. NATOUR~~
Signature/Incorporator

5-6-99
Date

MOAIED A. NATOUR

(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

MOAIED A. NATOUR
Signature/Registered Agent

5-10-99
Date

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA