

TRANSMITTAL LETTER  
**P99000058640**

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

**SUBJECT:** Armstrongs Automotive Repair, Inc.  
(Proposed corporate name - must include suffix)

000002915910--0  
-06/25/99--01075--008  
\*\*\*\*131.25 \*\*\*\*\*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

☐ \$122.50  
Filing Fee  
& Certified Copy

☒ \$131.25  
Filing Fee,  
Certified Copy  
& Certificate

**ADDITIONAL COPY REQUIRED**

**FROM:** Lisa D. Armstrong  
Name (Printed or typed)

32801 Highway 441 North Lot #7  
Address

Okeechobee, FL 34972  
City, State & Zip

(941) 357-1717  
Daytime Telephone number

**FILED**  
99 JUN 25 PM 12:11  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

gjc 6/29

## 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: Armstrongs Automotive Repair, Inc.

### **ARTICLE II PRINCIPAL OFFICE**

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

129 NW 13th Street  
Okeechobee, FL 34972

### **ARTICLE III SHARES**

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

100

### **ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS**

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

Lisa D. Armstrong  
32801 Highway 441 North Lot #7  
Okeechobee, FL 34972

### **ARTICLE V INCORPORATOR**

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

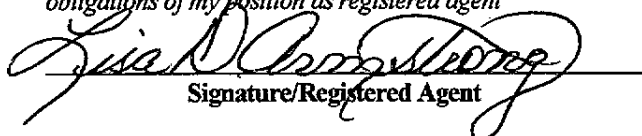
Lisa D. Armstrong  
32801 Highway 441 North Lot #7  
Okeechobee, FL 34972

  
Signature/Incorporator

6-23-99  
Date

(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*

  
Signature/Registered Agent

6-23-99  
Date

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TALLAHASSEE, FLORIDA