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Florida Department of State
Division of Corporations
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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To:

Division of Corporations
Fax Number : (850) 922-4001

From:

Account Name : FAS-T CORP. AGENTS, INC.
Account Number : 071001002335
Phone : (305) 599-0839
Fax Number : (305) 716-0346

FLORIDA PROFIT CORPORATION OR P.A.

REEVES AUTOMOTIVE, INC.

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$78.75

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**ARTICLES OF INCORPORATION
OF
*Reeves Automotive, Inc.***

ARTICLE ONE

The name of the corporation is *Reeves Automotive, Inc.*

ARTICLE TWO

The number of shares the corporation is authorized to issue is 1,000.

ARTICLE THREE

The street address of the initial registered office of the corporation is 4815 E Busch Blvd #113, Tampa, FL 33617 and the registered agent is Joseph Janezic.

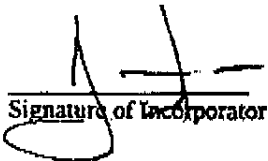
ARTICLE FOUR

The name of the incorporator is; Joseph Janezic 4815 E Busch Blvd Suite 113, Tampa, FL 33617.

ARTICLE FIVE

The mailing address of the initial principal office of the corporation is; 4815 E Busch Suite 113, Tampa, FL 33617.

IN WITNESS WHEREOF, the undersign has executed these Articles of Incorporation.


Signature of Incorporator

8-1-99
Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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CERTIFICATE OF DESIGNATION

REGISTERED AGENT/ REGISTERED OFFICE

Pursuant to the provision 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.

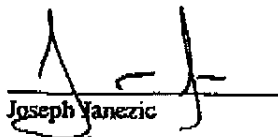
1. The name of the Corporation is:

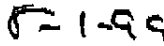
Reeves Automotive, Inc.

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

Joseph Janezic
4815 E Busch Blvd. #113
Tampa, FL 33617

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 obligation of my position as registered agent.


Joseph Janezic


Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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