Department of State Division of Corporat P. O. Box 6327 Tallahassee, FL 323	190000 ions	TAL LETTER	FIL 99 SEP 23 SECHETARY TALLAHASSEE	PM 6.21
SUBJECT: Au	to motive Re Ferral Ser (Proposed corpor	VICL NE + Work _ rate name - must include su	INC.	<u> </u>
		.	500002995 -09/23/990 *****87.50	5759 1093010 *****87.50
Enclosed is an origin	al and one(1) copy of the article	es of incorporation and	a check for :	
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	□\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
FROM:	MR. Joei AyALA Name (Pr	ninted or typed)		, T 44
	P. O. BOX 720	76-7 .ddress	· <u>-</u>	n
	Orlando, Fl. 3:	<u> 2872-0767</u> State & Zip		·· g-

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

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.	99 SEP 23 PM 6:21
ARTICLE I NAME	Section 23 PM 5: 0
The name of the corporation shall be:	TALLAHARA DI VI
Automotive ReFerral Service Network, INC.	TALLAHASSEE, FLORIDA
ARTICLE II PRINCIPAL OFFICE	
The principal place of business and mailing address of this corporation shall be: Bus. address: 634 Whipporwill br. or Lando, Fl. 32	825
Bus. mailing Address: P.O. Box 720767 or Lando, Fl. 328	372-0767
ARTICLE III SHARES The number of shares of stock that this corporation is authorized to have outstanding a	== .
1,000,000.00 (ONC MilliON)	
ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS of the initial registered agent are: MR. Joel AYALA	<u>RESS</u>
634 Whippoorwill Dr. Orlando, Fl. 32825	
ARTICLE V INCORPORATOR	
The <u>name and address</u> of the incorporator to these Articles of Incorporation are:	
MR. Joel AYALA	· · · · · · · · · · · · · · · · · · ·
P. O. Bux 77-0 262	·
Orlando, Fl. 32872-0767	
Softwarf 8/3	31/99
Signature Incorporator	Date
(An additional article must be added if an effective date is reque	ested)
(7 III HOLLICOMA MEDICO MADO II AN ONOCATO AMO IS TO CAS	.sodi)
Having been named as registered agent and to accept service of process for the above stated corporathis certificate, I hereby accept the appointment as registered agent and agree to act in this capacity, the provisions of all statutes relating to the proper and complete performance of my duties, and I a obligations of my position of registered agent	I further agree to comply with
0/7;	las
Signature/Registered Agent	Pate .
The state of the s	