

P99000098361

TRANSMITTAL LETTER

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

100003038041--3  
-11/08/99--01091--016  
\*\*\*\*\*87.50 \*\*\*\*\*87.50

SUBJECT: Vehicle Tracking & Recovery, Inc.  
(Proposed corporate name; must include suffix)

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: Manuel Aleixo  
Name (Printed or typed)

1210 Washington Ave #250  
Address

Miami Beach, FL 33139  
City, State & Zip

305-674-9004  
Daytime Telephone number

FILED  
99 NOV -8 AM 10:23  
SECRETARY OF STATE  
TALLAHASSEE, FL 32314

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

11-9  
WPC

## 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:

Vehicle Tracking & Recovery, Inc.

### ARTICLE II PRINCIPAL OFFICE

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

1210 Washington Avenue, Suite 250  
Miami Beach, FL 33139

### ARTICLE III SHARES

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

1000

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

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

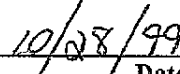
Manuel Aleixo  
1210 Washington Avenue, Suite 250  
Miami Beach, FL 33139

### ARTICLE V INCORPORATOR

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


Manuel Aleixo  
1210 Washington Avenue, Suite 250  
Miami Beach, FL 33139

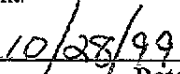
  
\_\_\_\_\_  
Signature/Incorporator

  
\_\_\_\_\_  
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

  
\_\_\_\_\_  
Date

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA