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Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 01 JUN 19 PM 1:35

SECRETARY OF STATE TALLAHASSEE FLORIDA

SUBJECT:	McNAB_TRANSPORT SE	RVICES, INC.		
	(PROPOSED CORPORA'	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)	
				5225—-7 -01114—016 0 *****87.50
Enclosed is an original	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  PPY REQUIRED	
FROM:				
	Name (Pr	inted or typed)	1-1	
	3000 SW 189th	TERRACE ddress		to the control of the second
	MIRAMAR FL 33029  City, State & Zip			
	954-431-0890	-		-
	Daytime Te	lephone number	<u></u>	e Vitalia Magazia in eagus de

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

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### ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

#### ARTICLE I NAME

The name of the corporation shall be:

MCNAB TRANSPORT SERVICES, INC.

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SECRETARY OF STATE TALLAHASSEE FLORIDA

#### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

3000 SW 189th TERRACE MIRAMAR, FL 33029

#### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TRANSPORTATION

#### ARTICLE IV SHARES

The number of shares of stock is:

100 SHARES

#### ARTICLE V INITIAL OFFICERS DIRECTORS (optional)

The name(s) and address(es):

DONNA COLEMAN

3000 SW 189th TERRACE

MIRAMAR FL 33029

#### ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

DONNA COLEMAN

3000 SW 189th TERRACE

MIRAMAR FL 33029

#### <u>ARTICLE VII INCORPORATOR</u>

The name and address of the Incorporator is:

DONNA COLEMAN 3000 SW 189th TERRACE MIRAMAR FL 33029

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Signature/Registered Agent

DONNA COLEMAN

Date

6/15/2001

Signature/Incorporator

DONNA COLEMAN