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CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):			
1. AIR IRAND MARINE		ument #)	
2. (Corporation Name)	ATT a		
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NEW FILINGS	AMENDMENTS		
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	Resignation of R.A., Officer/Director		
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	REGISTRATION/ QUALIFICATION		
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ARTICLES OF INCORPORATION

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OF

SECHELARY LE STATE TALLAHASSEE, FLORIDA

AIR TRANS MARINE, INC.

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be AIR TRANS MARINE, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of the corporation shall be 905 SULTAN AVENUE, OPA LOCKA, FLORIDA 33054.

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is **ONE HUNDRED** (100) shares of common stock, each share having the par value of **ONE DOLLAR** (\$1.00).

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is BERTA P. TORAL, 905 SULTAN AVENUE, OPA LOCKA, FLORIDA 33054.

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is BERTA P. TORAL, 905 SULTAN AVENUE, OPA LOCKA, FLORIDA 33054.

ARTICLE VI DIRECTOR(S)

The name(s) and street address(es) of the directors to the Articles of Incorporation is BERTA P. TORAL-PRESIDENT, 905 SULTAN AVENUE, OPA LOCKA, FLORIDA 33054.

ARTICLE VII OFFICERS

BERTA P. TORAL - PRESIDENT

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CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

SECRETARY OF STAI TALLAHASSEE FLORI

Pursuant to the provisions of sections 607.0501 or 627.0501, 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 AIR TRANS MARINE, INC.
- 2. The name and address of the registered agent is: BERTA P. TORAL, 905 SULTAN AVENUE, OPA LOCKA, FLORIDA 33054.

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

DATE Decembe

2002