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Florida Department of State
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To: Division of Corporations
Fax Number : (850) 205-0381

From: Account Name : YOUR CAPITAL CONNECTION, INC.
Account Number : I20000000257
Phone : (850) 224-8870
Fax Number : (850) 224-7047

05 APR - 5 AM 9:30

FLORIDA PROFIT CORPORATION OR P.A.

TAMPA TRAILER RENTAL INC

Certificate of Status	0
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05 APR -5 AM 9:30

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:

TAMPA ~~TRAILER~~ RENTAL, INC.
TRAILER

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

~~100~~ P.O. Box 17815 TAMPA, FL 33682

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

RENT TRAILERS

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

JOHN K. SHEPARD 1222 ROXMERIA Rd. TAMPA, FL 33629 PRES (D)
CAROLINE N. SHEPARD " " " " " " " " SEC & TREAS (

ARTICLE VI REGISTERED AGENT

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

JOHN K. SHEPARD 1222 ROXMERIA Rd. TAMPA, FL 33629

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

JOHN K. SHEPARD 1222 ROXMERIA Rd. TAMPA, FL 33629

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

John K. Shepard
Signature/Registered Agent

4-4-05
Date

John K. Shepard
Signature/Incorporator

4-4-05
Date