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(Business Entity Name)

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Special Instructions to Filing Officer:



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05 JUN 10 PM 2:31  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Office Use Only

*[Handwritten signature]*  
6/10/05

**TRANSMITTAL LETTER**

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

**SUBJECT:** Corpa Trans, INC-  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are 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

|  |   |
|--|---|
| <input type="checkbox"/> \$78.75 Filing Fee & Certified Copy | <input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status |
| <b>ADDITIONAL COPY REQUIRED</b>                              |   |

**FROM:** Maria Del Pilar Rodriguez  
Name (Printed or typed)  
13584 Turtle Marsh Loop #133  
Address  
Orlando, FL 32837  
City, State & Zip  
407-948-6691  
Daytime Telephone number

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

**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:

Corpa Trans, INC.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/ mailing address is:

P.O. Box 678814  
Orlando, FL 32867-8814

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Drive away Service  
Garage Keeper

**ARTICLE IV SHARES**

The number of shares of stock is:

1000

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

List name(s), address(es) and specific title(s):

Maria Pilar Rodriguez — President  
P.O. Box 678814  
Orlando, FL 32867-8814

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:


Pilar Rodriguez  
13584 Turtle Marsh Loop #133  
Orlando, FL 32837

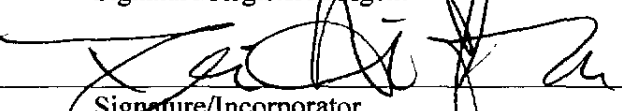
**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Pilar Rodriguez  
P.O. Box 678814  
Orlando, FL 32867-8814

\*\*\*\*\*  
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

  
\_\_\_\_\_  
Signature/Registered Agent

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

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TALLAHASSEE, FLORIDA

06-7-05  
\_\_\_\_\_  
Date

06-7-05  
\_\_\_\_\_  
Date