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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

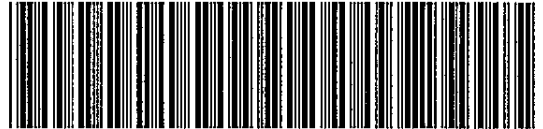
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

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9-28

COVER LETTER

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

SUBJECT: Triangle Enterprises, 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

\$78.75
Filing Fee
& Certified Copy

\$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: Wayne W. Willis
Name (Printed or typed)

561 Carey Way
Address

Orlando, FL 32825
City, State & Zip

407-382-9999
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: Triangle Enterprises, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is: 2431 Aloma Ave
Winter Park FL 32792

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
Auto Transport Services

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Wayne W Willis 561 Carey Way Orlando, FL 32825 (President)
Curtis Mannin 4607 Crossgate Rd. Chester VA 23831 (Vice Pr)
Veronica S. Willis 561 Carey Way Orlando, FL 32825 (Secretary/Treasurer)

ARTICLE VI REGISTERED AGENT

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

Wayne W Wittis 561 Carey Way Orlando, FL 32825

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is: Wayne W. Willis
561 Carey Way Orlando, FL 32825

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]

Signature/Registered Agent

10-24-05

Date

[Signature]

Signature/Incorporator

10-24-05

Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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