

CT CORPORATION SYSTEM

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FILED
01 MAR 23 PM 1:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION(S) NAME

La Porte Warehouse Co., Inc.

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03/23/01--01074--003

*****70.00 *****70.00

<input checked="" type="checkbox"/> Profit	<input type="checkbox"/> Amendment	<input type="checkbox"/> Merger
<input type="checkbox"/> Nonprofit	<input type="checkbox"/> Dissolution/Withdrawal	<input type="checkbox"/> Mark
<input checked="" type="checkbox"/> Foreign	<input type="checkbox"/> Reinstatement	<input type="checkbox"/> Other
<input type="checkbox"/> Limited Partnership	<input type="checkbox"/> Annual Report	<input type="checkbox"/> Change of RA
<input type="checkbox"/> LLC	<input type="checkbox"/> Name Registration	<input type="checkbox"/> UCC
<input type="checkbox"/> Certified Copy	<input type="checkbox"/> Fictitious Name	<input type="checkbox"/> CUS
<input type="checkbox"/> Photocopies	<input type="checkbox"/> Call When Ready	<input type="checkbox"/> Call If Problem
<input type="checkbox"/> Call If Problem	<input type="checkbox"/> Will Wait	<input type="checkbox"/> After 4:30
<input type="checkbox"/> Mail Out	<input type="checkbox"/> Will Wait	<input checked="" type="checkbox"/> Pick Up

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
2001 MAR 23 AM 11:31
NOT ATTENDED
TO ACKNOWLEDGE
SUFFICIENCY OF FILING

Name _____
Availability _____
Document _____
Examiner _____
Updater _____
Verifier _____
W.P. Verifier _____

3/23/01

Order#: 3885921

Ref#: _____

Amount: \$ _____

660 East Jefferson Street
Tallahassee, FL 32301
Tel. 850 222 1092
Fax 850 222 7615

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.*

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TALLAHASSEE, FLORIDA

1. LA PORTE WAREHOUSE CO., INC.
(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
2. TEXAS 3. 74-1778719
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 11/13/73 5. PERPETUAL
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. UPON QUALIFICATION
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. P.O. BOX 1517, LA PORTE, TX 77572-1517 (Mailing Address)
530 SOUTH BROADWAY, LA PORTE, TX 77571 (Physical Address)
(Current mailing address)

8. TO ENGAGE IN ANY AND ALL LAWFUL BUSINESS ACTIVITIES AUTHORIZED BY THE LAWS OF THE STATE
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida) OF FLORIDA.

9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box **NOT** acceptable)

Name: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation, Florida, 33324
(Zip code)

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

C T Corporation System

KIRK HOOD
ASSISTANT SECRETARY

(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and addresses of officers and/or directors: (Street address **ONLY** - P.O. Box **NOT** acceptable)

A. DIRECTORS (Street address only - P.O. Box NOT acceptable)

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: BRYAN MOORE, JR.

Address: 530 BROADWAY

LA PORTE, TX 77571

Director: DAVID MOORE

Address: 530 BROADWAY

LA PORTE, TX 77571

B. OFFICERS (Street address only - P.O. Box NOT acceptable)

President: BRYAN MOORE, JR.

Address: 530 BROADWAY

LA PORTE, TX 77571

Vice President: _____

Address: _____

Secretary: DAVID MOORE

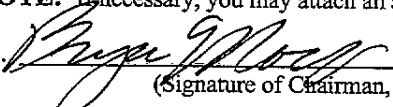
Address: 530 BROADWAY

LA PORTE, TX 77571

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. 
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. BRYAN MOORE, JR., PRESIDENT
(Typed or printed name and capacity of person signing application)



The State of Texas

SECRETARY OF STATE

FILED
01 MAR 23 11:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

IT IS HEREBY CERTIFIED that
Articles of Incorporation of

LA PORTE WAREHOUSE CO., INC.
File No. 333523

were filed in this office and a certificate of incorporation was issued to this corporation,
and no certificate of dissolution is in effect and the corporation is currently in existence.



*IN TESTIMONY WHEREOF, I have hereunto
signed my name officially and caused to be
impressed hereon the Seal of State at my office in
Austin, Texas on March 21, 2001.*

Henry Cuellar

Henry Cuellar BAM
Secretary of State