## TPOOODOA9040

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

3 <b>504</b> 049011 *****78.75
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Enclosed is an original and one(1) copy of the articles of incorporation and a check for:

\$70.00	
Filing Fee	

\$78.75	
Filing Fee	

rining rec		
& Certificate	of	Status

□ \$87.50

ADDITIONAL COPY REQUIRED

FROM: Tizel Bacce (A) Name (Printed or typed)	<del>-</del> .
111 West 31 Street	<u> </u>
Hipleah Fl 33012	
Daytime Telephone number	<u> </u>

SECRETARY OF STATE STATE CORPORATIONS OF MAR 16 PH 6: 06

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

93/22/00

## ARTICLES OF INCORPORATION

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

FILED SECRETARY OF STATE TYPISION OF CORPORATIONS

ARTICLE	Ι	NAME

The name of the corporation shall be: T & C Trailer and Container

00 MAR 16 PM 6: 06

Repair, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

III West 31 Street Hipleah, Fr 33012

<u>ARTICLE III SHARES</u>

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

1,000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Miquel Peña 2536 N.W. 32 Street Mirm. W. 333147

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Fidel Barrera -111 West 31 St Hialeah, Fl 33012

Signature/Incorporator

3 14 00 Date

(An additional article must be added if an effective date is requested.)

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/Registered Agent

Date