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00 JUL 24 PM 3: 13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Re: ONE STOP MOBILE HEAVY EQUIPMENT REPAIR INC.
574 MAINLINE BLVD
APOPKA, FL. 32712

Dear Department of State:

I am enclosing an original and one copy of the Articles of Incorporation for the above proposed corporation. [I reserved the above corporate name with your office pursuant to Reservation # _____], dated 07/05/00..

Also enclosed is a check/ money order in the amount of \$ 122.50 in payment of the following fees


Filing Fee	\$ 35.00
Certified copy fee	52.50
Registered Agent fee	35.00
Charter Tax	00.00

TOTAL 122.50

100003318171--9
-07/10/00--01108--008
****122.50 *****78.75

Please file the original articles and return the certified copy to me at the above address.

Sincerely,


Incorporator
MAXWELL A. WILLIAMS

W-126057
PAH 7/13/00 P1A 7/24/00



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

July 13, 2000

MAXWELL A WILLIAMS
574 MAINLINE BLVD
APOPKA, FL 32712

SUBJECT: ONE STOP MOBILE HEAVY EQUIPMENT INC.
Ref. Number: W00000017605

We have received your document for ONE STOP MOBILE HEAVY EQUIPMENT INC. and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of the entity must be identical throughout the document.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6915.

Pamela Hall
Document Specialist

Letter Number: 900A00038653

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION
OF

ONE STOP MOBILE HEAVY EQUIPMENT REPAIRS INC.

ONE: The name of the corporation is ONE STOP MOBILE HEAVY
EQUIPMENT REPAIRS INC.

TWO: The duration of the corporation shall be perpetual.

THREE: The address of the corporation is 574 MAINLINE BLVD
APOPKA, FL. 32712

FOUR: The general purpose or purposes for which this corporation is being formed are to operate a General heavy duty Repair Shop, including electrical, welding and any other lawful business activity for which corporation may be incorporated under Chapter 607 of the Florida Statutes.

FIVE: The aggregate number of shares, which the corporation shall have authority to issue is:

ONE THOUSAND (1,000) common shares
having a value of \$ 1.00 per share.

SIX: The registered agent and the street address of the initial registered office of the corporation in the state of Florida is:

Name

Address

MAXWELL A. WILLIAMS

Maxwell Williams

574 MAINLINE BLVD

APOPKA, FL. 32712

SEVEN: The number of directors constituting the initial board of directors is 3 and the name and address of each person who is to serve as a member thereof is as follows:

Name	Address
<u>MAXWELL A. WILLIAMS</u>	<u>574 MAINLINE BLVD</u> <u>APOPKA, FL. 32712</u>

<u>ROSALYNE E. WALTERS</u>	<u>574 MAINLINE BLVD</u> <u>APOPKA, FLORIDA 32712</u>
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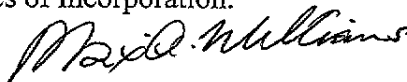
<u>JERMAINE WALTERS</u>	<u>574 MAINLINE BLVD</u> <u>APOPKA, FLORIDA 32712</u>
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EIGHT: The name and address of the sole incorporator is:

Name	Address
<u>MAXWELL A. WILLIAMS</u>	<u>574 MAINLINE BLVD</u> <u>APOPKA FLORIDA 32712</u>

IN WITNESS WHEREOF, the undersigned, as sole incorporator of this corporation has executed these articles of Incorporation.

DATED: 07-20-2000


MAXWELL A. WILLIAMS

The internal affairs of the corporation shall be governed by the By- Laws of the corporation, which shall be adopted at first meeting of the board of directors.

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TALLAHASSEE, FLORIDA

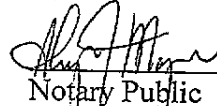
STATE OF FLORIDA

COUNTY OF SEMINOLE

I, HEREBY CERTIFY that on this day, before me, a Notary Public authorized
In the state and county named above to take acknowledgments, personally appeared
to me known to be the person described MAXWELL A. WILLIAMS
as the subscriber in and who executed the foregoing Articles of Incorporation, and
acknowledged before me that he/ she subscribed to those Articles of Incorporation.

WITNESS my hand and official seal in the County and State named above this

5 day of JULY, 192002.


Notary Public

My commission expires: 12/13/2002

I, the undersigned, hereby accept the appointment as Registered Agent of the above
noted corporation. I am familiar with, and accept the obligations of, Section 607.325 of
the Florida Statutes.

x 

