Florida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document

(((H00000040679 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 922-4001

From:

Account Name : BERRIZ & GIRALDO P.A.

Account Number : 719990000017 Phone

: (305)485-9300

Fax Number

: (305)485-1098

FLORIDA PROFIT CORPORATION OR P.A.

POINT 2 POINT TRANSPORT, INC.

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$78.75

T.SMITH AUG 0 3 2000

-1000000406793

ARTICLES OF INCORPORATION

OF

POINT 2 POINT TRANSPORT, INC.

THE UNDERSIGNED, has executed the following document as incorporator of the above name corporation, a corporation organized under the laws of the State of Florida, and all rights, duties and obligations of the undersigned as incorporator, and those of the corporation, are to be determined in accordance with the law of the State of Florida.

· ARTICLE I

The name of this corporation shall be:

POINT 2 POINT TRANSPORT, INC.

ARTICLE II .

This corporation shall commence existence upon the filing of these Articles of Incorporation by the Department of State, State of Florida, and shall have perpetual existence.

ARTICLE III

The general nature of the business and objects and purposed to be transacted and carried on by this corporation are to do any and all of the things herein mentioned, as fully and to the same extent as natural persons might do, viz:

- (1) Transact any and all lawful business.
- (2) Said corporation shall further have powers: To have perpetual succession by its corporate

name:

POINT 2 POINT TRANSPORT, INC.

Dora Enraldo 1080 SW 84 Gue /1000000406793. (305), 185-4300

H000000406793

ARTICLE IV

The aggregate number of shares which the corporation shall have authority to issue is the total sum of 50 shares, having an individual par value of \$10.00

Unless otherwise stated in these articles, or in an amendment to these articles, there shall be only one (1) class of stock of this corporation.

ARTICLE V

The street address of the initial registered office and the name of the initial Resident Agent of this corporation shall be:

HILDA OLIVAREZ -7591 W 34 LN HIALEAH, FL 33018

The principal office shall be:

7591 W 34 LN HIALEAH, FL 33018

The stockholders for this corporation are:

HILDA OLIVAREZ 7591 W 34 LN HIALEAH, FL 33018

50%

EMILIO CARDOSO 7591 W 34 LN HIALEAH, FL 33018

50%

H000000406793

H000000406793

ARTICLE VI

The initial Board of Directors shall consist of a total of **TWO** (02) person, and the name and address of the person who is to serve as an initial director is:

HILDA OLIVAREZ 7591 W 34 LN HIALEAH, FL 33018

EMILIO CARDOSO 7591 W 34 LN HIALEAH, FL 33018 PRESIDENT

VICEPRESIDENT

The name and address of the incorporator executing these Articles of Incorporation is:

HILDA OLIVAREZ 7591 W 34 LN HIALEAH; FL 33018

IN WITNESS WHEREOF, the undersigned incorporator has (ve) executed these Articles of Incorporation this 02 day of AUGUST , 2000

HILDA OLIVAREZ

H0000001-06793

Pursuant to the provision of sections 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, Submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The Name of the corporation is:

POINT 2 POINT TRANSPORT, INC.

2. The Name and Address of the registered agent and office is

HILDA OLIVAREZ 7591 W 34 LN HIALEAH, FL 33018

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. ANN I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION, AS REGISTERED AGENT.

SIGNATURE

Dated: Aliguet a sono

H000000406793